

CUTC® LUNG CANCER HEROES® 2020 ESSAY BOOK



CUTC[®] READERS HONOR LUNG CANCER HEROES | VOLUME 1

CURE[®] presents our readers with a unique opportunity each year to nominate a colleague, patient, friend and family of outstanding individuals working to end the stigma and make a difference in the lives of those affected by lung cancer. Together as one community, we can raise awareness of lung cancer, and most importantly, recognize and celebrate the esteemed individuals contributing to improving the lives of lung cancer patients, our Lung Cancer Heroes[®].



CURE[®]'s Healer and Heroes events are designed to inspire, instill hope and celebrate those who truly dedicate their lives to helping the cancer community at large. To learn more about our awards programs, **scan the QR code**.

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VOLUME 1

cute Lung Lung Lancer Heroes®

$CUT\!e^{\circ}$ readers honor lung cancer heroes

VOLUME 1



Cranbury, New Jersey

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This book is dedicated to all of the heroes in this space — patients, doctors, caregivers and advocates — who dedicate their lives and careers to improving care for patients and the lung cancer community.

If you would like to give this book as a gift to your lung cancer hero, we've provided this page for your message.

This book honors:



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Taking Lung Cancer as an Opportunity to Change Lives

THE INAUGURAL LUNG CANCER HEROES[•] awards program was held in October 2020, and it's incredible to think how far we've come in such a short time. Our doors are starting to open again (slowly and safely, of course) thanks to the emergence of multiple COVID-19 vaccines, which brings us that much closer to normalcy and to the possibility of holding this event in person later in 2021.

Regardless of whether this event is held in person or virtually, the fact is that Lung Cancer Heroes[®] — which include physicians, nurses and patient advocates, among others — have a major impact on our lives and are, as the name implies, heroic. Although we honored two physicians, a nurse and a patient advocate at last year's program, it's important to note that every person who was nominated is indeed a hero in our hearts.

The dictionary defines a hero as "a person admired for achievements and noble qualities" and "one who shows great courage," but I feel that limits the true potential that heroes hold. After reading the nominations for our Lung Cancer Heroes[®] awards, that definition doesn't do them justice. I read stories about patients who credited their doctors for being their rocks during and after their cancer journeys.

"When (my oncologist) met with (my wife and me), it always made us feel better to know someone had a plan in mind and there was a reason to hope for a good outcome," a patient »

wrote in his submission. "He gave us the bad news along with the good news, and he always had a plan of action ready for us. It was easy to commit to some scary treatments since we trusted he would give us all he had to make the journey comfortable and that he was thinking about what was best for us and for me. No matter how long it took, he always had time to listen to how cancer was affecting the rest of our lives as well. He helped when he could and just listened when we spoke."

In addition, several nominations highlighted the heroic efforts of patients who persevered during the toughest moments of their lives. Some patients realized the importance of the advocates around them and made it their focus to be advocates for other patients in the same position to potentially change the landscape.

We also awarded a special Lifetime Achievement award to a lung cancer survivor who dedicates her life to helping others who are vulnerable, at increased risk or receive a diagnosis of lung cancer. This mission was a result of a lack of available information and resources when she first started her cancer journey.

"One day when she was in the chemotherapy infusion chair, she realized she had to do something to improve the landscape for patients with lung cancer," her nominator wrote in her submission. "What little information she could find about lung cancer was not very helpful and offered little hope for the future. (She) made a commitment that if she made it through treatment and surgery, she was going to make a difference and improve conditions for all patients with lung cancer. She was committed to giving patients a voice and a seat at the table where decisions were made about their treatment and care."

We look forward to this year's Lung Cancer Heroes[®] awards program, which gives us another opportunity to hear more inspirational stories of people in the lung cancer space who rise above the troubles they face to make a huge impact.

— Mike Hennessy Jr. President and CEO of MJH Life Sciences[™]





Our Lung Cancer Heroes® Winners



From left: BETHANY WEBB and CAROLYN BAGGETT, M.S.N., RN, OCN PHOTOS BY CAROLENNYS STUDIOS

INCREDIBLE HERO WITHOUT A CAPE

CAROLYN BAGGETT, M.S.N., RN, OCN

BAPTIST MD ANDERSON CANCER CENTER, JACKSONVILLE, FLORIDA

Written by Bethany Webb, Jacksonville, Florida

THERE MAY BE MANY worthy of the Lung Cancer Heroes[®] award, but none more deserving than **Carolyn Baggett, M.S.N., RN, OCN**. Carolyn has made a measurable impact on the lives of her patients and colleagues as the oncology nurse navigator and lung cancer screening coordinator at Baptist MD Anderson Cancer Center. She also steps outside the health care system to contribute to the education and involvement to many in the Jacksonville and North Florida communities. I am a grateful recipient of her boundless knowledge, insight and compassion for those we both serve — our friends in our community with lung disease.

Carolyn has been a great contributor to the American Lung Association LUNG FORCE initiative in Jacksonville the past two years and is an active member of our cabinet. She has helped us secure corporate sponsorship for lung cancer research from her employer, Baptist MD Anderson, created teams of participants at the annual LUNG FORCE Run/Walk and supported the LUNG FORCE Expo, an event for education and camaraderie between patients and health care professionals. And she is a go-to resource for lung health education. Carolyn joined the team at Baptist in 2014 where she originally served as a lung cancer nurse navigator. In the words of one of **»**

Carolyn's former patients, "She's the voice after the doctor leaves to make sure I fully understand everything. She's been the MVP of Baptist MD Anderson for me."

Terra Mitchell was devasted when her husband, Eric, was diagnosed with stage 4 lung cancer in 2016. One of the first people they met at Baptist MD Anderson was Carolyn, who greeted them with her wonderful smile. "At that moment we knew we were in good hands. Carolyn was there with us every step of the way to guide us through this journey. No matter when, if we needed her, she was there for us." During that journey, Carolyn became more than a nurse navigator; she became part of the family. After the loss of Eric in 2018, Carolyn helped the family through their grief and encouraged Terra to share her story as a caregiver to help others. "She's more than a nurse — she's an angel, and I'm proud to call her my friend and sister," Terra said.

Although Carolyn loved her role as a navigator, she realized she could help patients with lung cancer with a screening program to help with earlier detection. Last year, Carolyn became the lung cancer screening program coordinator, ensuring a higher level of education and access to lifesaving screening, and she continues that role today.

Dr. Bill Putnam, medical director of Baptist MD Anderson, states, "The lung cancer screening effort was really initiated and driven forward by Carolyn, practically single-handedly. She organized the radiologists, surgeons and community physicians and provided pilot studies that could be examined and refined, and truly created a team that has now developed lung cancer screening at the highest level. There has been a significant impact on our patients within our Baptist Health System and in our Northeastern Florida community who now have access to lung cancer screening from their primary physician offices that never existed in the past. As a result, lung cancer screening has identified patients with early and asymptomatic lung cancers. Over 70% of our patients with lung cancer have early-stage disease that would not have been identified except for lung cancer screening. In addition, advanced-stage disease patients were identified prior to any symptoms occurring. In both situations, treatment was provided early to create the best environment for the patient to be cured and to improve their long-term survival. (Carolyn) has been a diligent and passionate advocate for screening and for annual surveillance for those



at risk and has provided significant education to our 170 Baptist primary care physicians and patient organizations.

"(Carolyn) has participated in our Baptist MD Anderson Cancer Center symposium and has been a resource for participants at that symposium on lung cancer screening. She has made a significant impact on the health of our Northeastern Florida community."

Committed. Educator. Advocate. Professional. Passionate. These are some of the words used to describe Carolyn by her colleagues, patients and friends. I would like to add one more: Hero. As in the movie "The Incredibles," Carolyn is a hero who doesn't wear a cape.

For the value that Carolyn adds to the health of her patients and our community, and for her continued gifts of time and expertise to the LUNG FORCE initiative in Jacksonville, it is my pleasure to nominate Carolyn Baggett for the Lung Cancer Heroes[®] award.

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SURVIVAL THROUGH SCREENING

AN INTERVIEW WITH Carolyn Baggett, M.S.N., RN, OCN By Mark Cantrell



CAROLYN BAGGETT, M.S.N., RN, OCN, was affected by lung cancer early on. Both of her grandparents died from lung cancer and a friend's parents also died from the disease, so it's no surprise that she chose oncology as a career.

In 2015, Baggett began working at Baptist MD Anderson Cancer Center (BMDACC) in Jacksonville, Florida, as a lung cancer nurse navigator, helping patients steer through the bewildering maze of specialists and treatments that is modern cancer therapy.

"As a navigator, you guide patients through their cancer journey emotionally, spiritually and medically," she explains. "When you come in as a patient (with cancer), you may see a pulmonologist, thoracic surgeon or medical oncologist, and each specialty has its own nurse. So you're seeing several different people, and often patients don't know which one to contact. The navigator is the one central person who can help them through the cancer center."

One of the more dismaying aspects of her job was learning that so many of her patients had stage 4 cancer with a poor survival rate. "The lungs have few nerve endings, so patients often don't know they have cancer until it spreads and they begin to have symptoms," she notes. "That doesn't usually happen until stage 3 or 4, and it doesn't always involve lung pain. We've had quite

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a few patients come in because they had pain in their hip or back (that) was actually caused by metastases from their lung cancer."

Understandably, most patients are shocked to learn they have lung cancer — especially those who are asymptomatic — and are too upset to think of questions to ask. That's why Baggett accompanied her patients to their doctor's visits, knowing that physicians often speak in very technical terms.

"As soon as the doctor left, I'd be the one to explain everything again to them in a way they could more easily comprehend. I thought that was the best way to assist the patient, by helping them understand their disease and treatment options," she says.

When the United States Preventive Services Task Force released its recommendation that health care agencies increase their lung cancer screening efforts, Baggett saw a chance to improve her patients' outcomes by catching cases at an earlier stage. She began to develop a screening program even before insurance companies agreed to cover it, acting as a liaison to gather a team comprised of different specialties. The program went live at the end of 2015 and has been a tremendous success.

"It's been very rewarding," Baggett says. "We've done more than 12,000 screenings so far, found 172 cancers and around 70% (were) early stage, which is always gratifying to me. I always get excited when I get a patient (with stage 1 cancer) because they have a 92% cure rate. It's wonderful."

For Baggett, the next step would be to develop and open a screening and prevention clinic at BMDACC focused on educating patients on how to prevent cancer and find early-stage cancers.

Although her current administrative role means she doesn't get as much direct contact with patients, Baggett is still very interested in their care. "Yesterday, a pathology report came in for a patient who was stage 1A2, and I had my own little celebration in my office," she says. "Those little victories are very fulfilling."

Baggett finds it truly rewarding to work toward improving the survival of patients with lung cancer and supporting the lung cancer community in northeast Florida.

OFFERING A HOLISTIC CONNECTION

DR. JENNIFER L. GARST

DUKE CANCER CENTER, RALEIGH, NORTH CAROLINA

Written by Paige Humble, MBA, Raleigh, North Carolina

DR. JENNIFER L. GARST has been a hero to many throughout her career. As a lung cancer specialist at Duke Cancer Center Raleigh, Dr. Garst has provided extraordinary cancer care. As a tireless advocate for her patients, she has made significant and lasting contributions to the lung cancer advocacy community.

More than 15 years ago, Dr. Garst became a founding member of Women Against Lung Cancer (now Lung Cancer Research Foundation), as she was keenly interested in gender differences in the disease and why younger nonsmoking women were being diagnosed at a higher rate.

As a leader in the national organization, she paired up with a small grassroots group in North Carolina to make a difference there. She lent her time, passion and expertise, allowing the group to begin fundraising and ultimately become a \$1 million income advocacy organization now known as the Lung Cancer Initiative of North Carolina (LCI).

Since LCI's founding in 2008, Dr. Garst has served as board chair and set the example of the health care provider as a patient advocate. She has graciously donated her time, participating and leading numerous educational opportunities for patients, the public and health care providers. **»**

From left: PAIGE HUMBLE and DR. JENNIFER L. GARST

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PHOTOS BY LINDSAY AIKMAN



Dr. Garst additionally founded LCI's research program, helping to ensure that the organization funds younger research fellows and investigators. She values the importance of helping them secure initial funding and bringing them into the field in the hopes they will continue their work. In addition, she has supported the expansion of the organization's access initiatives, including a gas card program to support access to appropriate care and treatment.

"As a leading lung cancer oncologist with Duke, she is in high demand with a very busy schedule; however, she never turns away someone who has concern or needs to be seen," said Amy Cipau, president and founder of LCI. "Dr. Garst shows endless compassion and empathy with her patients and their loved ones, and she is always quick to share resources, including those provided by LCI."

Many of Dr. Garst's patients and their families, such as Angela Nicholson, whose husband is one of Dr. Garst's patients, echo this sentiment about the individualized and sincere way she delivers care:

"My husband was diagnosed with stage 4 non-small cell adenocarcinoma lung cancer in June 2014," Angela said. "We were completely blindsided by this news, and the next steps unfolded quickly. With no time to research facilities or oncologists, we were referred to Dr. Jennifer L. Garst. From second 1, Dr. Garst showered us with the most direct and sincere level of support and care. Although the news was not always great, Dr. Garst came prepared with a plan of attack and backup options, if needed. She has been relentless in identifying new tests for genetic markers and potential alternative treatments to consider. Although we have not been successful in confirming the cause of his cancer, we have never felt that the treatment plan was not well thought out and intentional. The results speak for themselves; after four surgeries and two-and-a-half years of chemotherapy, we are blessed to report that my husband shows no evidence of disease. We could not be more thankful for the care and expertise that Dr. Garst provided. Even more important than her professional knowledge is her personal connection with each of her patients and their families. When Dr. Garst meets with us, we are her 100% focus; she wants to know what is going on in the life of the patient and their family. She genuinely wants to be a part of holistic process of care and recovery. Part of that process is connecting families with Lung Cancer Initiative of North Carolina to provide support, resources and advocacy opportunities. Although we would never choose to experience a lung cancer journey, we could not have navigated a steadier course without the help of Dr. Garst and LCI."

The impact of Dr. Jennifer Garst is known and felt across the lung cancer community in North Carolina and nationally. Most importantly, however, is the way that she has individually affected each of her patients through her thoughtful and steadfast pursuit of bringing the very best care and treatment options to them.

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'A VERY REWARDING JOB FOR MANY REASONS'

AN INTERVIEW WITH Dr. Jennifer L. Garst By Mark Cantrell



WITH A CHEMISTRY PROFESSOR for a father and a mother who was a medical technologist, Dr. Jennifer Garst almost seemed predestined to choose medicine for a career. "(My mother) would take me to work with her, draw some of my blood and we'd look at it in the lab," Garst says. "She'd show me how my blood was different from someone's with, say, leukemia, and I think that's what got me interested in disorders of the blood, which led me down the cancer path."

When Garst graduated from the Medical College of Georgia, she spent the first three years of her residency at the University of Texas Southwestern, which is known for its high-ranking general medicine program. When she decided to make oncology her specialty, she returned to Duke University, where she had previously interviewed. "I really enjoyed being at Duke, but the first time, it just wasn't a good fit," she says. "But once I decided to go down the oncology trail, it seemed like a perfect fit."

Garst spent the first 18 years of her career at Duke's main campus in Durham, North Carolina. Her duties included three days of clinical work with patients per week in addition to many research projects. "I worked with residents, interns, medical students, nurse practitioners and physician's assistants, teaching them about medicine and working in the clinic," she says. She was also the director of Duke's main campus oncology unit for 10 years.

Her experience in oncology made Garst the leading candidate to establish a multidisciplinary lung cancer program at Duke's Raleigh campus when the opportunity arose. "It sounded exciting, and I already knew how to do that because we had done it on the main campus," she notes. "We also

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got a lung cancer screening program up and running and a smoking cessation program, as well as providing assistance for lung cancer support groups."

As an oncologist, Garst marvels at the rapid advances being made in the field of lung cancer. "About two or three years ago, when targeted therapies and immunotherapies really began to take off, I remember saying to a colleague, 'It's getting to the point where I feel I'm letting someone down if I have to send them for chemotherapy,'" Garst says. She likens the new therapies to smart bombs or heat-seeking missiles that target only the cancer as compared with chemotherapy, which she views as more like indiscriminate carpet bombing that creates much more collateral damage.

"Not only do we have many more options for treatment, but the treatments actually work better than chemotherapy if those biomarkers are there," Garst says. "People live longer and better with their lung cancer, the toxicities are less and they have a better quality of life."

Not that targeted therapies are perfect: Garst mentions dry skin, rashes and itchiness, gastrointestinal upset, fatigue and loose stools as possible side effects. Immunotherapy can cause rash, colitis, lung inflammation and endocrine problems if the immune system is overstimulated. "They're pretty rare complications, but they do happen," she says.

Garst is a strong proponent of lung cancer screening, but "it's been kind of slow to ramp up," she says. "If you're in a high-risk category — aged 50 to 85 and have smoked for more than 20 years — you're eligible for lung screening. Fortunately, we're seeing many more family practice and internal medicine physicians recommending screening for their high-risk patients. It's just taken awhile for the medical community to catch on."

One issue Duke is investigating is cancer drug resistance, where medications that have worked for a patient in the past suddenly stop being effective. "The cancers get smart over time and learn how to become resistant to treatment," Garst explains. "We're coming up with some different ways to get around that resistance, and it will be a big step forward."

One of the best parts of her job, Garst says, is taking care of her patients and families throughout the entire spectrum of treatment. She also believes in helping them help themselves through education about nutrition and other empowering factors. Unfortunately, sometimes there are sad days as well. "I think to be an effective oncologist, sometimes your job is to help people through the sad times, too. So it's a very rewarding job for many reasons."

WORLD OF CONTRIBUTIONS

DR. FRED R. HIRSCH

ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI, NEW YORK, NEW YORK

Written by **Dr. Ramon Parsons**, Icahn School of Medicine at Mount Sinai, New York, New York

DR. FRED R. HIRSCH, who was born in a small town in Norway called Trondheim, always knew he wanted to become a doctor. He moved to Denmark to study medicine at the University of Copenhagen. During his studies, he became interested in research. Due to family circumstances, he became involved in lung cancer research and, while a medical student, he was mentored by Dr. Heine Høi Hansen, one of the pioneers of chemotherapy development for solid tumors, who had just returned to Denmark after five years at the National Cancer Institute. Together, they focused on the development of therapy for small cell lung cancer, and Dr. Hirsch became first author of a large clinical study evaluating etoposide for small cell lung cancer, which led to the drug's approval by the Food and Drug Administration (FDA) for that treatment.

After completing medical school in 1977, Dr. Hirsch was recommended to go to the National Cancer Institute. His doctoral work, "Metastatic Pattern and Tumor Heterogeneity of Small Cell Lung Cancer," was done under the supervision of Drs. John Minna, Paul Bunn, Adi Gazdar and Mary Matthews. Dr. Hirsch then defended his Ph.D. at the **»**



University of Copenhagen in 1982. After a career as a medical oncologist (also trained in pathology), he focused on lung cancer treatment and translational research in Denmark. Dr. Hirsch was invited to the University of Colorado in 2000. There he continued translational research with a focus on developing biomarkers for new targeted therapies in lung cancer, with a particular focus on EGFR inhibition. Among numerous scientific studies on EGFR biomarkers, both tyrosine kinase inhibitors and antibodies, Dr. Hirsch led patents on EGFR gene copy number and proteins for prediction of EGFR inhibition. These studies also included Dr. Hirsch as co-principal researcher for the clinical development of Portrazza (necitumumab), which led to its approval by the FDA for treating squamous lung cancer.

Dr. Hirsch has published more than 420 peer-reviewed scientific articles, mainly on lung cancer. Although the science of developing treatments for lung cancer has been his focus, Dr. Hirsch for more than 40 years also has been instrumental in global collaborations, education and scientific exchanges through the International Association for the Study of Lung Cancer (IASLC). After having served in many leadership capacities within IASLC, he became CEO in 2013. During his tenure as CEO, IASLC more than doubled its membership and saw a tremendous growth of its *Journal of Thoracic Oncology*. He changed the World Conference on Lung Cancer (WCLC) from biannual to successful annual meetings with approximately 8,000 participants. The organization's staff grew from five to 23 during his tenure. Many other activities were initiated during his tenure as CEO, including the start of the Lung Ambition Alliance, a collaboration with IASLC, AstraZeneca and several patient advocate organizations with the goal of doubling the survival rate for lung cancer by 2025.

For many years, Dr. Hirsch has served as a co-principal researcher for the translational medicine committee in the SWOG Lung Cancer Group. For the American Society of Clinical Oncology, Dr. Hirsch has served in many leadership roles, including chair of the IDEA Program for career development of younger researchers and chairman of the scientific lung cancer program for the group's annual meeting. Dr. Hirsch moved to The Tisch Cancer Institute at Mount Sinai in November 2018 with a new goal of developing a world-class multidisciplinary lung cancer program. Dr. Hirsch has received several awards, including the IASLC Mary Matthews Distinguished Award, AACR-Waun Ki Hong Lecture Award and Japan Lung Cancer Society Merit Award, and was recently recognized by the IASLC with the inauguration of the Fred R. Hirsch Lectureship Award for Translational Research, which will be given annually at the WCLC.

Whereas scientific and organizational developments have been landmarks for Dr. Hirsch, his care for patients has always been in the center and, as a cancer survivor himself, he will always have patient care at the forefront. At Mount Sinai, Dr. Hirsch plans to develop a lung cancer survivorship program in conjunction with the other cancer survivorship programs within The Tisch Cancer Institute. He also is leading development of survivorship programs for industry partners. Dr. Hirsch has trained many international fellows in his laboratory. Several are now key opinion leaders in the field, including Professor Benjamin Solomon (Australia), Dr. Federico Cappuzzo (Italy), Dr. Rafal Dziadziuszko (Poland) and Dr. Nir Peled (Israel).

EXCITING TIME FOR CANCER RESEARCH

AN INTERVIEW WITH Dr. Fred R. Hirsch By Mark Cantrell



LUNG CANCER TREATMENT has changed significantly since Dr. Fred R. Hirsch was a medical student in his native Denmark. Instead of the scattershot approach that was often taken in years past, today's treatments are much more targeted to the individual and have commensurately better outcomes.

"The treatment of cancer is much more complex than it was years ago," said Hirsch, executive director of the Center for Thoracic Oncology at Mount Sinai Health System, professor of medicine and pathology at Icahn School of Medicine and associate director of the Tisch Cancer Institute. "That complexity requires input, discussions and contributions from multiple disciplinary angles. That's why we now have multidisciplinary tumor boards to discuss individual patients. Every view is important to create a comprehensive treatment plan for patients (with cancer), and lung cancer is no exception."

One approach that has revolutionized cancer therapy is the ability to use biomarkers — tiny bits of genetic material — to guide the course of treatment. "A tumor is composed of what we call molecular features and can be different from person to person even if they both have lung cancer," Hirsch says. "There has been a dramatic development of drugs that can target these

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specific molecular abnormalities. If a patient has this molecular feature and receives a drug specifically targeted to that feature, then you can stop the process and kill the cancer cells. So you get a much more targeted, specific therapy that has much fewer side effects than conventional therapies."

The development of immunotherapy also has had a great and positive impact on the treatment of cancer. Receptors are proteins on the surface of a cell that bind with various substances. Some of those receptors work with the immune system, and "cancer is very good at trying to avoid the immune system," Hirsch explains. "Lymphocytes are a very important part of the immune system, and they also contain receptors. When they bind together with cancer cells, it breaks the immune system competence. But if you block them from connecting, it stimulates the immune system instead. So that's what we're trying to do."

As groundbreaking as the new cancer-fighting technologies have been, there is still much more work to be done, and much of it involves the human element, Hirsch says. He notes that lung cancer screening is capable of catching the disease at a much earlier stage and can reduce mortality up to 25%. Unfortunately, many who need it are not being screened. "It has not penetrated very well into the general population," he notes, "so only 4% to 5% of the people eligible for lung cancer screening are getting it."

Hirsch hopes that increased education and outreach will improve those figures. "We need to focus more on prevention," he says. "Unfortunately, there are many people who are still smoking, particularly younger people, but (approximately) 20% of patients (with lung cancer) have never smoked, so obviously more research is needed there. From a therapeutic point of view, we need to figure out how to combine the different approaches and drugs in the best way. Unfortunately, in most cases, cancers develop resistance to our therapies, and we need to learn what causes the resistance, determine the mechanism behind it and learn how to overcome it."

Nevertheless, Hirsch is heartened by the progress being made and feels we're living in one of the most promising eras in cancer research ever. "It's a very exciting time," he says. "I'm practically running to get to work every day — I can't get to the exciting work fast enough."

Lung Cancer Awareness

cure



From left: MAUREEN ROVAS and DEBORAH PICKWORTH

PHOTOS BY SHARON HOEG

HOPE IN STRENGTH

DEBORAH PICKWORTH

GARDEN CITY, MICHIGAN

Written by Maureen Rovas, Madison Heights, Michigan

IT IS A TREMENDOUS HONOR and privilege to write this essay for Deborah Pickworth's nomination for a Lung Cancer Heroes[®] award on behalf of the American Lung Association. Debbie has made an incredible impact over the past seven years as a passionate advocate for patients with lung cancer. Debbie's mother and grandmother both died from lung cancer, and Debbie is in her seventh year of living with stage 4 lung cancer. On her arm, you'll find a tattoo with a special message that reads, "I was given this life because I'm strong enough to handle it." Debbie's true strength can be seen in her support for and impact on those with lung cancer.

Debbie has been open and brave throughout her journey, willing to share her personal experience and dedicating countless hours to support others with lung cancer. Debbie runs a lung cancer support group from her home — now virtually — and is an Imerman Angels mentor. She wants to do all she can to make sure others get the support that was not available to her when she heard the words, "You have lung cancer."

Serving as an advocate for lung cancer survivors is at the heart of Debbie's work. She is passionate about changing ideas about lung cancer, especially its correlation to smoking. No one deserves this dreadful disease, and she wants people to be aware of their risk regardless of their tobacco use history. We truly value Debbie's engagement as a member of the American Lung Association's Patient Advisory Network. Debbie also has joined us in Washington, D.C., for the annual LUNG FORCE Advocacy Day. Debbie's meetings with representatives are memorable: »





WINNING ESSAY

she shares an album with pictures of all the lung cancer survivors she connects with on a regular basis.

Debbie serves as one of the American Lung Association's representatives as a consumer reviewer with the Department of Defense's Lung Cancer Research Program (LCRP). Debbie shares her perspective and experiences of other survivors with the LCRP as they address their strategy for the critical needs of the lung cancer research and patient community.

Debbie's dedication doesn't end there, though. Debbie continues to be very engaged in the event that brought her to the American Lung Association, the annual LUNG FORCE Walk Detroit. Team Pickworth has worked hard to raise awareness and funds to support the mission of healthy lungs and healthy air, raising more than \$17,300 over the past six years. Debbie is also a former event chair and current member of the engagement committee for the event, working with the staff to build a strong committee and succession plan for volunteer leadership.

Tireless, brave and supportive, Debbie is a remarkable volunteer and advocate, which makes her an exceptional candidate for this award. It is our honor to nominate Debbie, and we hope her incredible work will receive the well-deserved recognition.

WINNER PROFILE

DEFINING LIFE THROUGH ADVOCACY

AN INTERVIEW WITH Deborah Pickworth



By Mark Cantrell

MANY OF TODAY'S CANCER advocates had early experiences with the disease, and Deborah Pickworth is no exception. Pickworth's grandmother died of lung cancer in her 80s and her mother died at 47 of the disease. When Pickworth received a diagnosis of lung cancer at 43, she became determined to help as many others as she could, and her advocacy has defined her life ever since.

One of the fallacies Pickworth is determined to change is the misconception that lung cancer is a smoker's disease. "I smoked for maybe six years when I was in my teens, but I hadn't smoked in more than 20 years when I (received my diagnosis)," she says. "Some patients never smoked. If you have lungs, you can get lung cancer."

After the initial shock of the diagnosis, Pickworth used the internet to learn all she could. "They say you shouldn't Google, but you're going to, so I never tell people not to," she says. "I was lucky to find a website called Inspire.com. After you sign up and tell them what kind of cancer you have — and it's for all types — you meet people from all over the world who have the same type of cancer you do."

One of the suggestions posted on the site was to get a second opinion, which Pickworth immediately did. "When I was sent for further testing, they found I had a BRAF mutation, which makes up

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just 2% of lung cancers," she notes. Genetic testing was just getting started at the time, so Pickworth underwent chemotherapy for a year and then took a year off until a clinical trial for BRAF began.

Pickworth began to look for a support group in her area but found only terminal cancer groups. As she remembers, "I didn't want to be in downer mode; I wanted to lift people up." She attended a LUNGevity survivorship conference where she met someone from the LiveLung organization (motto: LiveLung and Prosper!) who helped her begin a lung cancer support group in Michigan.

"We had to go online when COVID-19 hit," Pickworth says, "but I do a monthly Zoom meeting with the support group, and it's actually grown during the pandemic." She also established a Facebook page called Michigan Lung Cancer Patients. Its members meet via Zoom on the first Tuesday of each month. Although the virtual meetings have allowed the group to continue, Pickworth misses the human interaction, saying, "It makes a big difference when you can meet people in person."

Pickworth often accompanies patients who recently received a lung cancer diagnosis to their doctor's appointments because "the first month everything everyone says just goes in one ear and out the other. Medical people are using big words and you don't know what they're talking about. It's very scary." With her experience, Pickworth helps those patients navigate their way through the system during what is probably the worst time of their lives. The arrival of COVID-19 meant she had to suspend those visits until the pandemic eases, but she plans to resume them as soon as possible. She urges patients with lung cancer to take copious notes during their doctor's visits, and "always take someone with you if possible. Get a second opinion, and make sure they do biomarker testing."

Although there have been many technological advances in lung cancer research since Pickworth received her diagnosis, the stigma surrounding the disease has been slow to recede. Although the cancer kills more people than breast, colon, prostate and pancreatic cancers combined, research has been chronically underfunded, Pickworth says, and she feels the stigma is one main reason why. It's a fallacy she aims to change: "Early detection and reducing the stigma are my main goals."



Lifetime Achievement Award Winner

FOUNDER'S SPIRIT

BONNIE J. ADDARIO

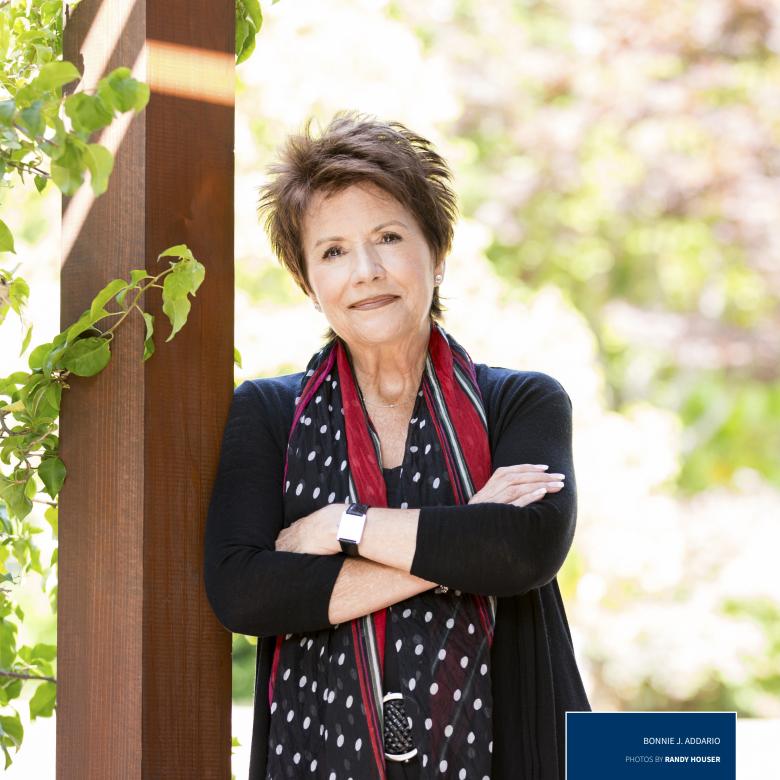
GO, FOUNDATION FOR LUNG CANCER, SAN CARLOS, CALIFORNIA

Written by Larry Gershon, Palo Alto, California

BONNIE J. ADDARIO is a 16-year lung cancer survivor. Her diagnosis of stage 3b lung cancer came with an uncommon and alarming caution. Doctors told Bonnie she had only a few months to live because the tumor was dangerously close to her heart, aorta and subclavian artery. Bonnie refused to accept this.

At the top of her corporate career, she was getting ready to retire as president of Olympian Oil and its subsidiary, Commercial Fueling Network, and stepping down as the first woman president of the California Oil Industry Marketing Association. She was a mother, grandmother, wife and community leader, and she had a lot left to achieve. She didn't stop until she found a more acceptable answer. She would need chemotherapy and radiation to shrink the tumor before it could be surgically removed, but she was more than willing to make that fight.

One day when she was in the chemotherapy infusion chair, she realized she had to do something to improve the landscape for patients with lung cancer. What little information she could find about lung cancer was not very helpful and offered little hope for the future. Bonnie made a commitment that if she made it through treatment and surgery, she was going to make a difference and improve conditions for all patients with lung cancer. She was committed to giving patients a voice and a seat at the table where decisions were made about their treatment and care. **»**



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On March 6, 2006, Bonnie founded the nonprofit Bonnie J. Addario Lung Cancer Foundation (ALCF). The foundation was patient-founded, patient-focused and patientdriven. Bonnie was on a mission to support, educate, empower and advocate for patients. ALCF's basic goals were to raise public awareness about the lack of attention and funding for lung cancer research, help patients with lung cancer and their families navigate the health care system to receive the best available care, enlist the aid of physicians and biomedical scientists in transforming lung cancer research through collaboration and innovation, and to ensure accessibility to all patients with lung cancer, especially the underserved, vulnerable and at-risk. She also was determined to dispel the unfair, long-held misconception that lung cancer was only a disease affecting smokers.

Bonnie and her family in 2008 founded a second nonprofit organization, the Addario Lung Cancer Medical Institute (ALCMI), an international, patient-centric research consortium of 25-plus academic and community medical centers in the United States and Europe. ALCMI drives scientific studies and clinical advancements through research, centralized tissue banks and data systems.

In April 2019, the ALCF merged with the Lung Cancer Alliance to form the GO_2 Foundation for Lung Cancer. The complementary strengths of the two foundations and the synergy of their combination have created the preeminent lung cancer foundation in the world. Good isn't good enough for Bonnie. The founding of this new foundation is a primary example of how she is always pushing for better.

Early in her lung cancer experience, Bonnie attended a lung cancer support group. It was in a gray building with gray walls. The tone and spirit of the event also was gray. Bonnie knew at that moment she needed to provide a better option for patients with lung cancer.

One of the primary support programs of the foundation has been its monthly Lung

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Cancer Living Room support/education series, titled "Bring HOPE Home." It takes place in a welcoming, comfortable setting. Leading physicians and researchers in the lung cancer field are guest speakers who willingly come to the living room because Bonnie asks them to. In layman's terms, they enthusiastically share the latest advances in treatment and their perspective on what the future holds for patients with lung cancer, answering questions and addressing concerns. Bonnie believes in the research that says educated, empowered patients live longer. She provides the perfect opportunity for all patients with lung cancer to help themselves live longer. The Living Room takes place in San Carlos, California, every month and at remote locations in the United States and other countries, including Mexico and Canada, periodically throughout the year. It is also streamed live on YouTube and Facebook. An archive of past videos is available on the foundation website in English, Spanish and Chinese. To date, the Living Room series has been seen by more than 1 million viewers in almost 150 countries.

Bonnie works tirelessly every day to improve the life of patients with lung cancer. Here's what some of her colleagues say about her: "Bonnie is the iron hand in the velvet glove." "Bonnie won't take no for an answer." "Bonnie is a doer." "Bonnie is a fighter." "Bonnie is a hugger."

If you have ever heard Bonnie speak at a lung cancer event, heard her ask important questions of the guest speaker in the Living Room or received one of her amazing hugs, you know immediately she is a lung cancer hero. One of her guiding principles for the foundation is, "Everything we do must be good for the patient." But the bottom line is that every patient with lung cancer, caregiver and anyone affected by lung cancer has Bonnie fighting for them. Whether you have known Bonnie for years or you have never met her, you can be assured she is your No. 1 lung cancer advocate and hero. She inspires all of us who are affected by lung cancer and offers us hope!

WINNER PROFILE

WORKING TOGETHER TO SUPPORT ONE ANOTHER

AN INTERVIEW WITH Bonnie J. Addario By Mark Cantrell



WHEN BONNIE J. ADDARIO began to experience shortness of breath and a sinking feeling in her chest 17 years ago, she had no idea what might be wrong. Unfortunately, neither did her physicians. After bouncing from doctor to doctor with no results, she and her husband decided to pay on their own for a full body scan. "After doing the scan, the radiologist came out and told me, 'Bonnie, go straight to your physician and take this scan with you.' That's how we learned I had lung cancer."

The sinking feeling was from a large tumor pressing on her aorta, and surgeons were reluctant to operate on a cancer so close to her heart. But she found a thoracic surgeon at University of California, San Francisco, who was able to move the mass far enough to excise it. "At the time, EGFR mutation research was still in its early stages," she remembers, "and wasn't available to the general public. So there was really just chemotherapy and radiation at the time."

The diagnosis put Addario in research mode, but the information she found wasn't encouraging. "The things I found on the internet were scary," she says. "They indicated it was a disease with no options, no therapies, no drugs, no nothing." By the time she began chemotherapy, Addario had made up her mind to take action.

"Sitting in that infusion chair for the first time, it really hit me that, 'Wow, this is real,'" she says. "I made a promise to myself to do something about that lack of information and the stigma around lung cancer." She began to ask family members and volunteers for help with establishing an information

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center for patients with lung cancer, setting up a program where they could call in to have their questions answered, learn where to get second opinions and receive other basic information.

When she was invited to a support group at a local institution, Addario found an environment that was anything but reassuring. "There was a long gray table, gray folding chairs, gray walls and, honestly, gray people." she says. "I thought, 'Gosh, there's no hope in here at all." Addario went back to her team and announced that they were going to form their own support and education group to focus on supporting patients with lung cancer and educating them about the disease.

The group Addario dubbed The Living Room quickly grew to reach 143 countries, attracting key speakers from the lung cancer community. She then began streaming them on YouTube. "It shows that you don't always have to spend a fortune to get the word out," she says. "We asked ourselves how we could expand our group to include all the people who wanted to join, and streaming was the answer. I knew nothing about that kind of thing at the time, but we tried it and it worked."

In 2006, she started the Bonnie J. Addario Lung Cancer Foundation, and in 2008 she established the Addario Lung Cancer Medical Institute (ALCMI), which focused on research. "ALCMI got started because of a young girl named Jill Costello," Addario says. "She was misdiagnosed many times before (receiving) a correct diagnosis of lung cancer and she passed away a year afterward. We decided to create an organization devoted to young people with lung cancer." ALCMI became an international research consortium composed of investigators from 21 institutions in the United States and abroad.

In 2019, the foundation merged with the Lung Cancer Alliance to form the GO_2 Foundation for Lung Cancer, growing into a national organization with international partners. ALCMI now partners with the GO_2 Foundation on various research initiatives. "Lung cancer is a huge issue, and it needs a huge initiative to fight it," Addario says. "We can't all be working on our own private islands — we all need to work together." Addario is dedicated to fighting not only lung cancer but also the stigma that keeps some patients from seeking screening. That's one reason she just released her book "The Living Room."

"There have been more new drugs for lung cancer in the past five years than in the past five decades," she says. "When that number starts to get out to the public, people will be more willing to go get screened for early detection because there are now remedies out there for them."



Nominations

A DOCTOR AND A FRIEND

DR. DAVID N. BARRERA

TEXAS ONCOLOGY, FORT WORTH, TEXAS

Written by Mark A. Arneson, PA-C

DR. DAVID N. BARRERA is the first one that doctors call for oncology advice. David has treated lung cancer since he was out of oncology fellowship. I worked with him then and at the end of my career. Many doctors would call and say, "I want to speak to my friend David." That impressed me because in my 40 years in oncology, most doctors always call each other "Doctor." David trusted me to take care of his patients, but I knew he would always be honest and show humility to all and expect the same from staff and colleagues.

It is fitting now that he can offer his patients treatments that are far less toxic and more efficacious than ever. David's patients and their families deserve the best, and they always get that at Texas Oncology.

PASSION IS HER MIDDLE NAME

JUTTA BECKER

NORTH SMITHFIELD, RHODE ISLAND

Written by Jennifer Wall, Cumberland, Rhode Island

NOT ALL HEROES WEAR CAPES or have superpowers. Rather, according to actor Christopher Reeve, "a hero is an ordinary individual who finds strength to persevere and endure in spite of overwhelming obstacles." Jutta Becker does not wear a cape and she cannot fly, but she does soar. Jutta is dedicated to educating and raising awareness about lung cancer. She inspires others to fight back and make lung cancer a stigma of the past. During her quest to save others from the deadliest cancer, she undergoes lung cancer treatments, all while maintaining a positive attitude and a heart full of gratitude. My American Lung Association colleagues and I have been blessed to serve and learn from Jutta. Let me share some more about why Jutta Becker deserves to be recognized as part of the inaugural 2020 class of Lung Cancer Heroes[®].

Jutta Becker was born in Idar-Oberstein, Germany, and moved to Providence, Rhode Island, in 1975. She resides in North Smithfield with her husband of 40 years, Mustapha Gharaee, and their rescue beagle, Paisley. Jutta and Mustapha have two adult sons, Ryan »





and Erik. Jutta spent an ample amount of her career as a goldsmith and jewelry designer. She loves spending summers at their beach house in Matunuck, Rhode Island.

In August 2012, Jutta had a cough, which she thought was due to seasonal allergies because she felt well and went to the gym several times a week. Pain from a so-called pulled muscle from coughing was enough to send her to her physician's assistant, who ordered an X-ray, which showed pneumonia. Four weeks later, she was still coughing at her follow-up appointment, at which time she was given the choice of more antibiotics or a visit to the emergency department. Jutta luckily chose the emergency department and was given a CT scan as part of the testing process. On August 3, at only 58 years old, Jutta was diagnosed with lung cancer. Three days later, she left the hospital with a stage 4 nonsmall cell lung cancer adenocarcinoma diagnosis and a prognosis to "get her affairs in order." A few years later, another biopsy was performed that resulted in better news. Her oncologist told her she had a rare gene mutation known as epidermal growth factor receptor positive. A small percentage of those diagnosed with non-small cell lung cancer have this mutation, which is »



most often found in nonsmoking women of Asian descent. As previously mentioned, Jutta is German. Several different types of targeted oral chemotherapy medications, more genomic testing, another positive mutation (T790) and a different targeted oral therapy, followed years later by radiation and chemotherapy, Jutta Becker today is an eight-year, stage 4 non-small cell lung cancer survivor! She continues to fight, not only for her life but for better lung cancer treatments and cures for everyone.

When Jutta was first diagnosed, she immediately went to work learning as much as she could about lung cancer and effective treatments. Before she could educate others, she knew she first had to educate herself. Jutta said, "The toughest part was deciding on this path of targeted medicine as opposed to standard chemotherapy. It took a lot of research, finding people who have gone through the same treatment and learning about all the up-and-coming treatment options. We, as patients, have choices now, and doctors leave those choices to us. We, or our caregivers, need to be educated to advocate for us and make the best possible decisions." She became involved with the GO_2 Foundation for Lung Cancer, the Dana-Farber Cancer Institute and the Bonnie J. Addario Lung Cancer Foundation. She attended forums, trainings and events, and she scoured the internet for lung cancer information from trusted sources.

During this educational journey, Jutta found the American Lung Association and became involved with our LUNG FORCE movement. LUNG FORCE unites women and their loved ones across the country to stand together for lung health and against lung cancer. Every five minutes, a woman in the United States learns she has lung cancer. Jutta was compelled to join the movement because she believed that more needed to be done to raise awareness and that more research funding was needed to defeat lung cancer. She was a LUNG FORCE pioneer and has been actively engaged since the movement first began. Jutta attended the inaugural Rhode Island LUNG FORCE luncheon kickoff event. She became an avid LUNG FORCE social media educational ambassador, echoing messages about lung cancer facts, screening, the importance of early detection and treatments. Annually, during National Women's Lung Health Week, she participates in the LUNG FORCE Turquoise Takeover by attending kickoff **»**

events and asking everyone to "paint Rhode Island turquoise" to raise awareness about lung cancer. Jutta has been involved in all Rhode Island LUNG FORCE Expos since they debuted. Jutta is an active member of the LUNG FORCE Expo planning committee, has participated on lung cancer treatment educational panels, has shared her story during lunchtime LUNG FORCE presentations and has even served as a master of ceremonies for the patients and caregivers tracks.

In 2015, Jutta appeared on a live PBS broadcast to share her story and promote lung health. She believes that "primary physicians protocols need to be changed; CT scans need to be available earlier for everyone, not just those aged 55 and older who smoke; people of all ages, smokers and nonsmokers alike, need to have access because lung cancer can affect anyone." Simply put, she says, "if you have lungs, you can get lung cancer. Keep an eye on your body, listen to your body, tell your physicians everything. I was employed in the jewelry industry and this never came up."

Most recently, Jutta has taken to her Facebook page to provide advice during the COVID-19 pandemic. A recent post stated: "As a (patient with cancer), I have mastered the art of isolation and social distancing. Once a person is diagnosed with a terminal illness, isolation is automatic. Except for a small group of very good friends, this has been my experience. Best part of my life is Paisley, my rescue beagle. If you are newly isolated because of the current situation, relax; it can get easier. Make your home your sanctuary and be thankful for what you have. If possible, rescue a cat or dog. You will have an instant best buddy. There is no greater feeling than to be loved and needed. Check out the shelters. Stay safe."

"Passion" is Jutta's middle name. She is a seasoned advocate who is persistent about continuously advocating for a better quality of life for everyone who is affected by lung cancer. Each year, Jutta participates in the Rhode Island LUNG FORCE Walk. Held nationwide, LUNG FORCE Walks are an outdoor event series to support and promote lung health. Family, friends and co-workers gather for a morning of healthy activity and purpose. Walks provide critical funds for lifesaving research and early detection initiatives. Every year, Jutta serves

on the Rhode Island LUNG FORCE Walk planning committee. As the team captain of "Jutta's Amigos," she raises funds, she walks and she advocates. Collectively, Jutta's teams have raised more than \$15,000.

"Dear friends, my friends have always been supportive with my fundraising marathons and walks, but this is the first time I benefit personally from your gifts. I am alive because of a gene mutation in my lung cancer and the development of a drug to attack that mutation. I'm part of a small percentage of patients who get a bit more time because of these drugs. That small percentage translates into hundreds of thousands of people worldwide (now helping) me raise funds towards finding a cure. A big thank you to all," she posted.

Last year, before the walk, Jutta was hospitalized for five days, but that didn't stop her from advocating, "First-class ride to The Miriam Hospital. Going to spend a couple of days in the drainage department. Seems my chest is full of fluid and there is no room for air. I'm hoping to recover by next Saturday for the LUNG FORCE Walk at Roger Williams Park in Providence, Rhode Island. Please register and/or donate under my name or team 'Jutta's Amigos.'"

Nor did it stop Jutta from attending this event with her team. "I'm home from the hospital on oxygen and will be at the walk. Walking is out of the question this year. What I am experiencing, is pleural effusion linked to my lung cancer. This is a very uncomfortable situation where the fluid displaces the lungs. The lungs collapse leaving me short of breath. I had over two liters of fluid removed but it will come back. Most likely I will have a permanent spigot installed. This all reinforces my need for research dollars." And she did not stop there. If LUNG FORCE is having a fundraiser, Jutta shows up.

Additionally, Jutta is highly engaged in state and federal advocacy initiatives, which include signing petitions and encouraging others to follow suit; making phone calls, send-ing emails and meeting with state and federal legislators to educate and advocate; and making her voice known on social media platforms. Her advocacy asks include providing equal access to quality and affordable health care insurance for all (including protecting patients with pre-existing conditions, enshrining consumer protections into state law »

and not repealing or rolling back the Affordable Care Act); raising the minimum tobacco sales age from 18 to 21; ending the censoring of science, which could lead to air pollution policies that fail to protect the public; and protecting kids from an overabundance of electronic cigarette advertising. Here are a few of Jutta's advocacy messages: "My first medication was \$6,000 per month. The second medication I received was through participating in a clinical trial for almost two years. I am now on Tagrisso (osimertinib), which is \$16,000 per month. Without my health care insurance covering the medications, CT scans, biopsies and constant monitoring of the disease, I would be dead. I'm doing quite well considering my diagnosis. The added stress and worry of some of the proposed changes for the health care insurance industry are bringing on a new kind of anguish. It's frightening."

"November is lung cancer awareness month. Where are the ribbons? Where are the stories of survivors? Where are the walks/runs/bake sales to raise funds? Where are the clever T-shirts? Where is the funding? Why is it my fault I got this? Why do the insurance companies cover drugs for other cancers but not lung cancer? Why is there no celebrity to fight for lung cancer? Why does everyone ask me if I smoked? Why do I have to lie when I'm asked how I feel? Why are kids getting diagnosed with lung cancer? Why does it take a community hospital 30 to 45 days to diagnose lung cancer? Why am I even asking all this? There should be no classism in cancer. Support lung cancer research, please." »





I would be remiss if I didn't mention that Jutta Becker volunteered and was chosen twice to attend LUNG FORCE Advocacy Day in Washington, D.C. Advocates from across the nation joined together as one force, turning Capitol Hill turquoise, and talking with their members of Congress about pressing lung cancer matters. "Nailed it. Senator Jack Reed is fighting to increase funds to the National Institutes of Health (NIH). Dr. Collins, head of the NIH, has been the biggest supporter of genomic research for the past 25 years. Thanks to his efforts, I'm getting the drugs I need. Quite an experience and civics lesson for a girl from a small town in Germany."

Inspiring others to stand up against lung cancer and associated stigma is ingrained in Jutta's DNA. If there is an opportunity to publicly speak, Jutta embraces it. For two years, Jutta has volunteered at the Autumn Escape Bike Trek fundraising event, which is a one-, two- or three-day bike tour across Cape Cod. The Massachusetts trek is designed for experienced and novice cyclists alike. On the final night, participants gather in the outdoor amphitheater for the "Spirit of the Trek." One time, Jutta was invited to take the stage and share her story. It was emotionally charged, bringing many to tears. Jutta inspired everyone to keep on trekking, to stand up against lung disease and surrounding stigma, to raise their voices for clean air and protection from harmful air pollution. She asked participants to ride and fundraise for not only her but for everyone who has lung cancer and lung disease. The following year, Jutta volunteered again, this time for two days, cheering riders on as they crossed the finished line and awarding medals when riders completed the trek.

If there is an opportunity to raise awareness about lung cancer, Jutta seizes it. Jutta has shared her story with hopes of educating large audiences through the *Providence Business News* and HuffPost website. "I really didn't know anything about lung cancer before my diagnosis. I saw lung cancer as a smoker's disease, and I was never a smoker. I thought that people in heavy industries, such as coal mining, who inhale toxic chemicals, got lung cancer. I never thought of it as a disease affecting women on a grand scale, but it does. I want people to know that."

"It's really important to educate yourself and serve as your own advocate," Jutta says. "Make sure you get all the scans you need and make use of all diagnostic tools. Find a doctor who is committed to fighting for your life and committed to helping you establish a good quality of life. Keep in mind that a second opinion can save your life. It's very important to build a team of oncologists, pulmonary, palliative, alternative treatments, mental health, social and spiritual support."

Through all of life's challenges, Jutta has kept a positive attitude. I think Jutta's son Ryan said it best: "If I've learned anything from my mother, it's that life isn't about the 'what if,' it's about the 'what now?' When you get the call, answer it with gusto ... and a smile. Be excellent to each other. We're all we've got."

Jutta is one of the most appreciative people I have met, and her gratitude has no bounds. "To all who helped me reach my fundraising goals this year, especially for the LUNG FORCE Walk, a huge thank you, Merry Christmas, Happy Hanukkah, happy life, good health and a great new year." One year, Jutta accepted an invitation to share her story with a group of 80 American Lung Association public health professionals. She traveled two hours each way, and when she was done educating us all, she thanked us for everything that we do. There wasn't a dry eye to be found and she received a standing ovation that went on for several minutes. Simply put, Jutta forgets no one. "Still here because of Dr. David Jackman. Thank you. Five-year anniversary today since diagnosis."

Jutta Becker is anything but ordinary. A quarter of her personal Facebook posts focus in one way or another on lung cancer advocacy, education, inspiration and appreciation. Couple this with the exorbitant amount of time she has spent volunteering and making a difference in the lives of everyone affected by lung cancer, you unequivocally, undeniably have a hero in need of recognition. Please consider providing this hero with her turquoise cape with the letters "LC" plastered across the back. Thank you for the opportunity to nominate this extraordinary woman and for everything *CURE*[®] magazine is doing to support lung cancer advocates.

WINFIELD BOERCKEL, M.S.W., MBA, LCSW-R PHOTO BY **KELLY CODRINGTON**

DEDICATION AND LONGEVITY

WINFIELD BOERCKEL, M.S.W., MBA, LCSW-R

CANCERCARE, SYOSSET, NEW YORK

Written by Maureen Rigney, M.S.W., Washington, D.C.

WINFIELD BOERCKEL, M.S.W., MBA, LCSW-R, is director of social service at the Long Island, New York, office of CancerCare, where he provides clinical services to Long Island residents dealing with a diagnosis of cancer or providing care to a loved one with cancer. After a successful career as an engineer with the Long Island Rail Road, Win came to oncology social work as a second career after his wife died from cancer in 1982.

Simply put, Win has demonstrated his place among lung cancer heroes every day since starting at CancerCare in April 1996.

Win currently coordinates CancerCare's National Lung Cancer Program, but his sensitivity to the particular needs of and challenges to those affected by lung cancer was evident from the beginning when he launched CancerCare's first lung cancer-specific support group in 1996. His current lung cancer group on Long Island, which was started in 1997, is the longest-running lung cancer support group continuously run by the same facilitator in the United States. This uncommon dedication was recognized with the inaugural GO_2 Foundation for Lung Cancer (then Lung Cancer Alliance) Support Group Facilitator Award in 2009.

Win has dedicated his social work career to supporting, counseling, educating and dispelling myths of an often-neglected cancer and population. His expertise on the psychosocial aspects of lung cancer and the needs of the community make him a sought-after speaker and advisory board member. He works closely with LUNGevity and has been invited to share his knowledge at meetings of many other organizations, including the American Lung Association and the Lung Cancer Research Foundation. Win serves or has served as an adviser for lungcancer.org, cancer.net and *CURE*[®] magazine. He represents CancerCare at national and international conferences, where he presents posters and gives oral presentations.

Win's dedication to advancing lung cancer extends beyond the United States. For many years, he has served as treasurer on the steering committee of the Global Lung Cancer Coalition (GLCC). In 2001, CancerCare was a founding member of GLCC, the international voice of the lung cancer community. Win's expertise has resulted in him giving international presentations, including at the World Conference on Lung Cancer in Paris, Toronto and Barcelona.

I have had the great pleasure of witnessing Win Boerckel's exemplary dedication to lung cancer for nearly 15 years. Whether running a support group, providing counseling to those diagnosed and their loved ones, organizing meetings to gather the input of other experts to better understand the lung cancer experience, reviewing lung cancer grant proposals for Prevent Cancer's Community Grants program, authoring research articles, hosting CancerCare's Lung Cancer Walk for Hope or lending his calm and steady voice to the Connect Education Workshop, Win works tirelessly for the lung cancer community.

For 24 years, Win Boerckel has exemplified a lung cancer hero. I cannot imagine a more worthy candidate for the award.





A HUGE HEART

KATIE BROWN

LUNGEVITY FOUNDATION, DALLAS, TEXAS

Written by Mari Casanova, Dallas, Texas

I'M NOMINATING KATIE BROWN as my hero and, I'm sure, the hero for many lung cancer survivors. I was diagnosed on December 29, 2017, with small cell lung cancer. I didn't have a clue about cancer, and never had anyone in my family or close to me with cancer. I was about to find out that my life would never be the same. After my chemotherapy and radiation, I was looking for somewhere to join a group of survivors. I had a strange story; after my third chemotherapy round, I was in remission, but I had to go through radiation to my brain and my lungs. That left me totally lost. I was so sad. Nobody had a similar story in any group of patients with small cell lung cancer.

That's where my hero, my angel, came in. One night, searching for a meaning to my life, I came upon LUNGevity. I started reading about the foundation, and right before my eyes, I'm reading about a summit in Washington, D.C., in April 2019. The deadline for a grant was in two days. I tried so hard to sign up that night, but for some strange reason, the application would not go through. I cried because the brain radiation affected my thinking and any little task at that time was hard for me.

I waited for the morning to call. It was Katie who answered. I broke down, told her my story and that I would love to be around people like me, the new me. Her compassion was amazing. »

I knew from her voice that she cared. It was like magic. I found a person who understood what I had gone through. She told me that she would help me with the application and that she would get back to me. Two days later, she informed me I was going to Washington, D.C. I was so excited. I had something to look forward to. It was a miracle I was going to meet others like me. She changed my life at that moment. I started eating and feeling better about myself. I started to read everything about LUNGevity and about Katie. I had not been so happy in a long time. She made it possible for me, and I'm forever grateful. Only one person from all the survivors there had survived small cell lung cancer, but in her charismatic way, Katie made sure I felt at home.

I came back fearless because one person changed my life. I got my confidence back. She did that for me. I'm humble and grateful she came into my life.

I realized she was just that amazing. Her heart is huge. She's just an honorable human being. She sends me all types of things to read and is always checking up. I adore Katie. She was meant to be a part of LUNGevity.

She is truly a kind, dedicated, unselfish, beautiful — inside and out — young lady. I'm sure many of us feel the same way. She goes above and beyond. That type of love for what she does makes her a hero. You would never know her trials, as she's so busy saving and caring for everyone else. Katie Brown is my angel, my hero. She deserves this award. LUNGevity has a jewel of a lady as their vice president, and she stands by her work.

MARI CASANOVA PHOTO BY KEN CARL

ROCK SOLID CARE

DR. BRIAN BURNETTE

GREEN BAY ONCOLOGY, GREEN BAY, WISCONSIN

Written by Steve Sendele, Rockford, Illinois

FOR ALL CANCER SURVIVORS, I hope and pray you encounter the support I had in my journey with cancer. My wife was with me every step and, as you can expect, she experienced similar emotions to what I was going through: the fear, uncertainty, anxiety and dread of what lay ahead. It truly was a roller coaster for us.

There was always one rock in our journey and that was Dr. Brian Burnette, who, luckily for me, was the oncologist assigned to us at the clinic. When he met with us, it always made us feel better to know someone had a plan in mind and there was reason to hope for a good outcome. He gave us the bad news along with the good news, and he always had a plan of action ready for us. It was easy to commit to some scary treatments since we trusted he would give us all he had to make the journey as comfortable as possible and that he was thinking about what was best for us and for me. No matter how long it took, he always had time to listen to how cancer was affecting the rest of our lives, as well. He helped when he could and just listened when we spoke. **»**



As I think back on it now, it is crazy to think he prescribed gallons of that poison they pumped into me, but we believed in him and went forward with the treatment. The real payoff was when the surgeon removed my lung and told us the tumor was dead (the surgeon used a larger word that I cannot spell). Somehow, Dr. Burnette was able to read the biopsy, perform his calculations and kill that petri dish inside me.

It has been 10 years now since Dr. Burnette treated me and, even today, the thought of his cowboy boots brings a smile to my face and a warm feeling to my heart.

I thank God for my wonderful family who have been with me through this life journey and for Dr. Burnette, whom He sent to us when cancer invaded my life. Dr. Burnette was our rock that we always knew we could go to.

CONSTANT ADVOCATE

CHRIS CHILDRESS

HCA HEALTHCARE, SOUTH ATLANTIC DIVISION, CHARLESTON, SOUTH CAROLINA

Written by **Kammi Fox-Kay, M.S.N., RN, AOCNS, ONN-CG(T)**, Trident Medical Center, Charleston, South Carolina

I WOULD LIKE TO NOMINATE Chris Childress, lung nodule coordinator for HCA Healthcare, South Atlantic Division, for a Lung Cancer Heroes[®] award. For the past year, Chris has tirelessly fought to assure that patients who present to the emergency departments affiliated with Trident Medical Center are appropriately followed up for lung nodules found on CT scans. Chris makes endless phone calls to patients who may otherwise have ignored lung nodules and not sought medical attention after the initial emergency department visit. He ensures that patients who do not have insurance obtain the resources needed to obtain an appointment with a pulmonologist in our Lung Nodule Clinic. He has formed alliances with community resources to ensure diagnostic testing is completed in a timely manner and that patients follow through with physician appointments and biopsies. He is a contact for a patient during a scary time when they are unsure of what this mass in their lung is. He makes referrals to appropriate financial counselors to initiate conversations regarding patients' costs and is also instrumental in ensuring patients apply for Medicaid if they are diagnosed with lung cancer. His communication skills and enthusiasm for the job are surpassed by none. He is constantly assessing his workflow and coming up with new initiatives with the multi-specialty team to ensure patients are connected with appropriate physicians to care for their needs.

As the certified thoracic oncology nurse navigator at Trident Medical Center in Charleston, South Carolina, I want to recognize Chris Childress as a lung cancer hero.

From left: LORNE and MARY COCHRANE PHOTOS BY KELSY NIELSON

HOW TO SPELL 'HOPE'

LORNE COCHRANE

ATMORE, ALBERTA, CANADA

Written by Mary Cochrane, Atmore, Alberta, Canada

LORNE COCHRANE IS 60 years old and no stranger to the ravages of lung cancer. The disease claimed the lives of so many who were close to him: his grandfather, his mother and father, two aunts and his twin brother. It was the stage 1 diagnosis of his brother and the death of his mother in 2012 that propelled Lorne at age 52 to get screened.

Despite having no symptoms, lung cancer was staring Lorne directly in the face, and something was telling him that he needed to look into it. To his shock and dismay, the disease had spread from several tumors in both lungs to his adrenal gland, kidney and pancreas.

Radiation and surgery were not options. Palliative chemotherapy was the course of treatment, and Lorne was given a timeline of 12 to 13 months to live. This was terrible news to Lorne, his wife, his two children and three grandchildren. He was in good shape and felt fine. How could he only have a year of life left? Lorne was always optimistic, and his perspective didn't change in the face of Canada's No. 1 cancer killer.

Lorne and his family were not ready to accept the news. His wife, Mary, was driven to do everything in her power to help him and began to research new treatments and clinical trials that, if nothing else, could give Lorne more time. After the chemotherapy quit working, »





Mary and Lorne discussed with their oncologist the possibility of other treatments such as clinical trial drugs. Lorne said, "I'm young and still feel healthy. Why don't you try something on me now instead of waiting until I'm on death's doorstep? If it will benefit others and maybe myself, then I'm willing to be a test pilot." After a few weeks, Lorne's oncologist called him and said that a trial had come available and asked if he would like to participate. Lorne said yes without hesitation.

After working with his oncologist to complete the required tests, he was enrolled in the trial and began the treatment. His side effects were minimal. After four weeks, the phlegm cleared up, a positive sign. After nine weeks on treatment, the medical team noticed something: Lorne's tumors showed a major reduction in size. This was incredibly promising for Lorne, his family and the researchers following his journey. Eventually, the tumors were unmeasurable and the prognosis he had initially received disappeared. It was a remarkable response from a new approach that would change the way the medical community looked at treating lung cancer.

Lorne's story highlights the importance of persistence and hope. Science and innovation would change life for him and his family. Lorne remarks, "Science and research are how I spell 'hope.'" Lorne's twin brother, Lloyd, was not fortunate enough to be on the same treatment and died in November 2016 due to complications from lung cancer. It has been more than seven years since Lorne's diagnosis, and Lorne credits his wife, his doctor and all of the researchers for saving his life. He continues to undergo routine screening and considers this the "new normal." Lorne and his family urge patients to never give up; lung cancer can be beaten, and he is living proof!

Since 2015, Lorne has attended many speaking engagements, telling his story of hope and encouraging other patients with lung cancer to never give up. He is involved with a peer-to-peer group where he answers questions and strives to give patients hope with his story of survival. Lorne Cochrane is our hero.

POWER OF HOPE

DR. BRUNO FANG

ASTERA CANCER CARE, EAST BRUNSWICK, NEW JERSEY

Written by Mark Klein



MY WIFE, LINDA, was diagnosed with stage 4 lung cancer with almost no symptoms. We then went to Dr. Nissenblatt's office in East Brunswick, New Jersey, and met Dr. Bruno Fang. After PET scans and chest CT scans. Linda was told she had one to one-and-a-half years to live. Dr. Fang said he would do everything in his power to give her longer life and quality of life. He started with chemotherapy that healed the damaged bone while constantly reducing the size of the main tumor. She was on this chemotherapy for two years until it started to lose its effectiveness, so he changed to another chemotherapy. He never gave up and gave Linda, our children and me confidence. Dr. Fang gave her three-and-a-half years of life and almost three years of quality of life. She was able to see and hold our last grandchild only because Dr. Fang never gave up. He is not only our hero but the hero of all his patients. He definitely deserves recognition for his caring care of all his patients as well as his fight against cancer.



GRATEFUL FOR HELP

DR. MARCOS ANDRÉ COSTA

OSWALDO CRUZ GERMAN HOSPITAL, SÃO PAULO, BRAZIL

Written by Maria do Carmo Lopes Lins

EXTREMELY ATTENTIVE, Dr. Marcos André Costa helped me through a very difficult moment. Very human doctor.

THE PERFECT BALANCE

DR. JENNIFER L. GARST

DUKE CANCER CENTER RALEIGH, RALEIGH, NORTH CAROLINA

Written by Jon Gorman, Youngsville, North Carolina

I FEEL I AM VERY well qualified to provide the characteristics that make Dr. Garst a hero!

Calling Dr. Jennifer L. Garst a hero would be a gross understatement. She has been my oncologist for six-and-a-half years now. I am a very involved patient and ask a lot of questions about our strategy and decisions. She always obliges and explains. She backs up her decisions with data but also isn't afraid to stray somewhat from the traditional based on everything she's seeing for that patient at that time.

Early on, she extended my life by holding off on chemotherapy and insisting on a biopsy and genetic test. This delay would prove to be an incredible gift of time, allowing me to go directly onto Tarceva (erlotinib) instead of chemotherapy/radiation. That initial gift of time snowballed into other treatments that I was able to get on just after approval. Since the beginning, she has managed my treatment the best I could possibly imagine. I have been through some pretty difficult treatment decisions with Dr. Garst, and she has helped me navigate them extremely well. I have had at least three situations where my medication was denied repeatedly by insurance, and Dr. Garst and her team worked tirelessly to provide the necessary details and have the **»**

From left: JON GORMAN and DR. JENNIFER L. GARST PHOTO BY LINDSAY AIKMAN 3D

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necessary conversations. I have had several second opinions to better understand my options (often at her request), and they served to educate me and assure me that we are on the right path. She has navigated my care with amazing foresight, tenacity and compassion. She is one of a kind and an amazing contribution to patients with cancer in this area.

She is calming and reassuring, yet honest and truthful about your situation. She will fight tirelessly for you. She will always pursue the best option for you and your situation. She will listen intently to your input and consider it within the larger picture. She is (appropriately) upbeat, compassionate and able to dial up or down the proper approach and emotions for the situation. She brings an amazing combination of science, artistry and human compassion, along with her in-depth medical knowledge. She takes care of the dirty work and lets the patient focus on their health. She eliminates worry as much as possible. She is thorough; she has yet to cut an appointment short due to time, always addressing all the issues. She is available and will make adjustments if possible to accommodate unplanned changes and emergencies. She is involved in community and advocacy in a genuine, heartfelt way. She is engaging. She will take the time to answer your questions. She will put you at ease, regardless of the situation. She is clearly focused on helping you the best way she and her team can without politics and competing agendas. She is simply an amazing oncologist, and I have been blessed to have her leading my care.



MUSIC LEADS TO AWARENESS

HILDY GROSSMAN, PH.D.

BROOKLINE, MASSACHUSETTS

Written by Crispin B. Weinberg, Ph.D., Brookline, Massachusetts

"I'M GOING TO ASK YOU to do something, and you're going to say 'yes." So began the phone call from Hildy Grossman, Ph.D., a true lung cancer hero. She wanted help producing a show to raise money for the hospital where she had been treated for lung cancer. Little did she or anyone else realize that this was the beginning of an organization that has been going strong for more than 10 years. Upstage Lung Cancer has helped fund millions of dollars of research for early detection and targeted therapies using music and musical theater.

Upstage Lung Cancer began as a dream 13 years ago when Hildy celebrated her first year free of disease. When she learned about lung cancer's incidence and prognosis, she set out to change things. Building on her talent as a singer and her previous experience in community theater, she started Upstage Lung Cancer with a few of her closest friends.

The mission is two-fold:

- Raise funds for further research in early detection and targeted therapies.
- Raise awareness and understanding of lung cancer. »

Her brilliant idea was to use music and musical theater as vehicles to accomplish these aims in a joyous, welcoming and positive way.

So, what does she do? Although she has a professional practice as a psychologist and sings in a professional cabaret group, The Follen Angels, she is so dedicated to volunteering for Upstage Lung Cancer that it is hard to imagine she does anything else!

There is no such thing as a typical day, since she will do just about anything to make Upstage Lung Cancer succeed: soliciting potential donors, from merchants to pharmaceutical firms; recruiting volunteers for activities and events; stuffing goody bags; recruiting board members and hosting board meetings; writing scripts for shows; performing at fundraising shows with other cabaret artists; writing ads for publicity; working with partner organizations to leverage funds; meeting with scientists who are potential grant recipients. It would be easier to list the things she *doesn't* do: bookkeeping, accounting and secretarial work. Fortunately, she recognizes her limitations and recruits volunteers to ensure that those essential tasks are performed properly.

Upstage Lung Cancer remains an all-volunteer organization in large part due to Hildy's personal energy and infectious enthusiasm. Upstage Lung Cancer, in partnership with organizations such as LUNGevity and Bonnie J. Addario Lung Cancer Foundation, has donated millions of dollars to research in early detection. Thousands of people have learned more about the disease through Upstage Lung Cancer's shows and special events.

Hildy's creative energy in founding and nurturing Upstage Lung Cancer has made many more people aware of the disease. Every house party or cabaret show includes an educational component so that attendees learn more about lung cancer and its terrible toll. Furthermore, many lung cancer survivors and their families benefit directly as others are educated about the disease.

Hildy epitomizes the idea, "If life gives you lemons, make lemonade." She took a diagnosis of lung cancer — a devastating event — and turned it around to create a beautiful organization that celebrates life, bringing joy and hope to survivors. Her own story of buying a pair



of cute sandals, slipping on the stairs because they had smooth soles and getting an MRI for the injury, which showed a spot in her lung, led to Upstage Lung Cancer's motto, "Survival should not be an accident." She has taken her accidental survival and made that into a mission to help others. Hildy Grossman is a true lung cancer hero.

lomas Spillane, M.D noologist/Flematologist From left: DR. TOM SPILLANE and DR. EDWIN HAYASHI

PHOTO PROVIDED BY SPILLANE

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SMALL-TOWN CANCER TEAM, BIG SUCCESS

DR. EDWIN HAYASHI

ASSOCIATED SURGEONS OF SAN LUIS OBISPO, CALIFORNIA

Written by **Dr. Tom Spillane**, San Luis Obispo Oncology and Hematology, San Luis Obispo, California

I AM A MEDICAL ONCOLOGIST who has worked on the central coast of California for the past 20 years. I am proud to say that, despite our location in a small community equidistant from San Francisco and Los Angeles, we have developed an oncology program that I feel rivals that of any tertiary care center in the world. I credit our success largely to the unabated efforts of Dr. Edwin Hayashi, a surgeon and local cancer care leader who has developed our state-of-the-art multidisciplinary cancer team.

Through his tireless efforts, Edwin has developed accredited cancer programs at Sierra Vista Regional Medical Center, French Hospital Medical Center and Arroyo Grande Community Hospital. Given that this is a rural area with a number of small hospitals, this was no easy task, requiring countless of hours coordinating with the American College of Surgeons. Currently, we have well-established accredited programs that, as Dr. Hayashi »

would say, ensure that all of our patients in San Luis Obispo County have access to the same care that would be available at any large academic cancer center.

Dr. Edwin Hayashi is the committee chair and chair of surgery for all the cancer programs. He is also the chair and leader of our multidisciplinary tumor board. Edwin and his brother, Dr. Howard Hayashi, perform the majority of lung cancer surgeries here on the central coast of California, ensuring the availability and access to all current surgical expertise and technology. The brothers frequently volunteer and teach surgical technique around the world.

So why, one might ask, would two of the world's best surgeons be found in a small community such as ours? Well, they both are proud members of a pioneering agricultural family that migrated here from Japan in the early 1900s. Enduring internment camps during World War II, these dedicated early American farmers ingrained a passion for hard work and a faithful commitment to family. Both Edwin and Howard, at an early age, were up before the sun, in the fields, working for hours before going to school. Perhaps the dedication, care and perseverance required to grow a strawberry may be the best training a surgeon could have.



CANCER PIONEER

DR. FRED R. HIRSCH

ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI, NEW YORK, NEW YORK

Written by Dr. Raphael Catane, Shaare Zedek Medical Center, Jerusalem, Israel



DR. FRED R. HIRSCH and his team made lung cancer a more treatable disease. In his laboratory and at his clinic, he discovered biological pathways that allow clinicians to better treat lung cancer. He is a pioneer in the biological treatments of lung cancer that replace traditional chemotherapy.



MARTIN KEISER PHOTO BY ATHENA BLUDÉ

UNCONVENTIONAL CANDIDATE

MARTIN KEISER

IV BIOHOLDINGS, FAIRFIELD, CONNECTICUT

Written by Dr. Fady Kadifa, Laguna Hills, California

IN 2018, AT THE HEIGHT of his Wall Street career, at the age of 32, and with a wife and two young daughters to support, Marty Keiser made a life-changing decision to walk away from everything and go all in on what he believed to be the early innings of a bio revolution.

Marty believed that the next wave of medical innovation would derive from creative entrepreneurs who seamlessly integrate data, technology and capital; inject data and technology into the research and development process; rely on people and money to accelerate growth; and identify strategic partners to fast-track the commercialization of biomedical solutions.

Although there is no shortage of problems to be solved across the health landscape, Marty made his bio debut by tackling one of the biggest addressable markets in oncology: lung cancer.

LiquidLung, a startup launched in December 2018, is focused on radically improving the detection, diagnosis and treatment of lung cancer, and it is far from your average biotech startup.

The company is entirely virtual — no lab, no overhead. What it does have, however, is a comprehensive portfolio of science required for the detection, diagnosis and treatment of lung cancer such as the industry has never seen. »

Whereas academia and industry are heavily focused on circulating tumor DNA and cell free DNA, under Marty's leadership as founder and president, LiquidLung's focus is on the underlying biology of the patient, not the tumor. A combination of gene expression analysis and evolutionary computing methods is the key differentiator for the company.

What began with four novel biomarkers required to diagnose a prevalent subtype of non-small cell lung cancer is now a validated portfolio of 128 novel RNA gene expression biomarkers across six diagnostic categories (lung cancer detection, small cell lung cancer classification, non-small cell lung cancer classification, and classification of the three most prevalent histological subtypes of non-small cell lung cancer).

All markers have been prospectively validated across two independent cohorts with impressive accuracy. LiquidLung's 23 mRNA lung cancer detection markers, for example, validated in a prospective validation study with 97% sensitivity and 79% specificity (out of sample). More importantly, when the lung cancer detection model was applied to the validation dataset, they



prospectively detected 100% of stage 1 lung cancers, 89% of stage 2 cancers, 100% of stage 3 cancers, and 100% of stage 4 cancers — positioning the company to lead in the coveted (and currently untapped) early detection market.

Further, by mathematically optimizing their lung cancer detection model biased toward specificity, they demonstrated a positive predictive value of 100% and a negative predictive value of 98.9% (based on an assumed lung cancer prevalence of 3% in a high-risk population of patients). Interestingly, the new model was optimized purely from mathematics alone and did not require the discovery of any new biomarkers. This is another differentiator and example of the unique approach taken by the company.

If that weren't enough, Marty has great expectations for the 105 type/subtype biomarkers in inventory and believes that these markers not only have the potential to further enhance the sensitivity and specificity profile of their lung cancer detection test, but that they may also unlock new product opportunities for downstream testing and procedures (definitive diagnosis, staging, therapy selection, treatment response and drug development).

Almost more impressive than the science is the fact that LiquidLung completed all biomarker discovery and research and development validation studies in less than six months on a very modest sum of seed capital. Marty's hope, fueled by a deep and genuine love for people, is that the speed and efficiency related to their business model and research and development process will pass down to patients in the form of effective and affordable bio solutions that are easily accessible to people all around the globe.

Marty is an unconventional candidate for this award. He doesn't have any of the degrees or industry accolades that most of the candidates will likely have. But through creative vision, resourcefulness and a willingness to take risks and embrace new technologies, Marty has made an incomprehensible contribution toward solving a major unmet medical need that has the potential to save many lives, reduce risks and generate significant economic value for patients with lung cancer, payers and all of his stakeholders.

I hereby nominate Marty Keiser for a Lung Cancer Heroes® award.

PASSION FOR ADVOCACY

ASHLEY LEBLANC, RN

MERCY MEDICAL CENTER, TRINITY HEALTH OF NEW ENGLAND, SPRINGFIELD, MASSACHUSETTS

Written by Amber Pelletier, M.S.W., Framingham, Massachusetts

ASHLEY LEBLANC, RN, graduated with her bachelor's degree in nursing from Westfield State University and has more than 15 years of experience in the health care industry. Ashley began her nursing career as a bedside intermediate critical care nurse. Ashley now works at Mercy Medical Center, Trinity Health of New England, as the nursing director of the lung cancer screening program and as a nurse navigator for thoracic surgery.

Ashley is a tremendous asset to the lung cancer community — she lives and breathes hope into her patients and providers day in and day out. As nursing director, she manages Mercy's lung cancer screening program, and her passion for the program and patients with lung cancer can be seen in her dedication and commitment to her job and this community. Ashley continually advocates for change and helps implement best practice measures within the program. Ashley's leadership has resulted in numerous lives saved through Mercy's lung cancer screening program.

Beyond the program, Ashley continually works to serve the lung cancer community. She has served as the nurse planner for the American Lung Association's LUNG FORCE Education Event in Springfield, Massachusetts. This evening event is in its third year and aims to provide »

ASHLEY LEBLANC, RN PHOTOS BY MADISON KOPIE



up-to-date research, guidelines and information to providers each spring through continuing medical education. Not only has Ashley served as the nurse planner for this event — she spearheaded its creation. Ashley saw a lack of lung cancer continuing education opportunities for providers in western Massachusetts and requested that the American Lung Association and leaders at Mercy meet to discuss how we could bridge this gap. Additionally, Ashley served as the nurse planner for our LUNG FORCE Expo in East Hartford, Connecticut. The LUNG FORCE Expo is a program designed for patients, caregivers and health care providers to learn more about the latest trends, resources and research surrounding lung cancer, chronic obstructive pulmonary disease and asthma. Ashley's assistance with this year's expo was unmatched. She is always willing to assist, provide feedback and advocate for important lung cancer initiatives.

Continuing education is a priority to Ashley. She seeks out continuing education opportunities regularly to expand her lung cancer knowledge. Ashley's commitment to screening goes beyond her responsibilities as a nurse and continuing education. She currently coordinates and plans an annual fundraiser for Mercy's lung cancer screening program. This fundraiser ensures that those who cannot afford screening have scholarship opportunities available. Ashley plans this event on her own, and it is something she is truly passionate about. She does not want financial limitations to prohibit saving someone's life.

Ashley is the secretary of Mercy's Nurse Quality Council. She also serves on the patient safety council, cancer committee, community benefits committee and is co-chair of the lung cancer screening committee. Ashley is actively involved with the Council for a Tobacco Free Springfield and the Massachusetts Comprehensive Cancer Prevention and Control Network Lung Cancer Screening Collaborative. She constantly works to improve the Mercy screening program and to help build the knowledge base of so many providers in Massachusetts and beyond. She is committed to her job and this community, often prioritizing engagements above her family. Ashley is truly deserving of this award.



BLESSED TO HAVE A HERO

DR. AARON S. MANSFIELD

MAYO CLINIC, ROCHESTER, MINNESOTA

Written by Leah "Cherry" Lommen, La Crosse, Wisconsin

DR. AARON MANSFIELD is my hero! I'm 74 years old and was very healthy and robust. I played a lot of tennis and was very conscious about weight and diet. I had never smoked. I was diagnosed with stage 4 lung cancer, and I was beyond shocked. Dr. Mansfield mapped out a plan with a first-line chemotherapy treatment and since then I've been in several trials for new drugs. His care and concern have been incredible. He cares so much and goes well beyond basic treatment. He's an incredible, intelligent, talented oncologist. I'm blessed to have him on my side. He is so deserving of this award! Thanks for considering him.

EDITOR'S NOTE: Leah "Cherry" Lommen died shortly after this essay was submitted in July 2020. Our thoughts go out to her family and friends.

AN INSPIRING, GUIDING LIGHT

DR. AARON S. MANSFIELD

MAYO CLINIC, ROCHESTER, MINNESOTA

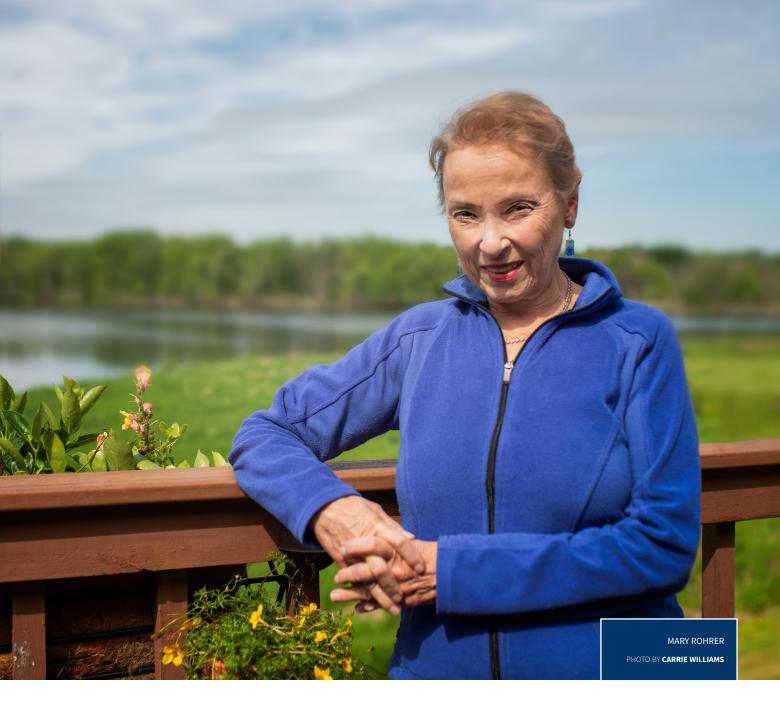
Written by Mary Rohrer and Leah "Cherry" Lommen, La Crosse, Wisconsin

RECEIVING A LUNG CANCER diagnosis is stunning enough, yet in the aftermath of that diagnosis, the worst is yet to come. Dr. Aaron Mansfield of Mayo Clinic, a physician who diagnoses and treats lung cancer, is the *best* to come in this field of battling and defeating this disease. What do we say that?

Leah "Cherry" Lommen says, "First of all, and most importantly, Dr. Mansfield treats all of you: your body, your emotions and your soul. He gives you emotional, physical and optimistic hope. He arms you with what you need to confront and battle this disease. You are not alone because he is with you all the way in this journey. He strengthens you with the scientific knowledge he provides, with his courage as a role model and with his fighting spirit."

Mary Rohrer's family brought Hans Swart, an army colonel from Johannesburg, South Africa, and his wife at last-minute notice to see Dr. Mansfield at Mayo Clinic.

"We have never in our lives seen anything like this man," Hans Swart's wife said. "We were overwhelmed with his care of Hans. He gave us the tools we needed for a treatment plan in »



South Africa, including helping locate a doctor in Johannesburg who would take on the work needed to make the plan work. Never mind the money — he didn't care about that. He cared about getting Hans' life back to him! Money was not his (goal); taking care of us the best way he knew, armed with his working knowledge of lung cancer, was. He said, 'We will find a way; don't worry about the money.' We left the exam room with more than the knowledge of lung cancer, but also with the spirit we needed to keep the faith and carry on! Besides all of that, he is so intelligent, too!"

Lommen adds, "My husband, Dick, and I feel very strongly about how Dr. Mansfield promotes the patient and caregiver understanding of the diagnosis and treatment options. He also is a leader in imparting his knowledge to other practitioners worldwide. He helped us locate clinical trials pertinent to my situation. Dr. Mansfield is the guiding light to beating this disease. His activity in research and education is known globally. Most importantly, he is passing his knowledge on to others who in turn will help beat lung cancer."

Rohrer, a cancer survivor, says, "Dr. Mansfield received the 2018 Excellence in Teaching award from Mayo Clinic. He is a top reviewer for the *Journal of Thoracic Oncology*. One thing we all agree upon, Dr. Aaron Mansfield walks and talks Mayo Clinic's mantra of 'The needs of the patient come first.' He lives and breathes this mantra daily. When you are with Dr. Mansfield, you feel there is nothing more important to him at that moment than listening and working with you in defeating this disease. His are not 15- to 20-minute appointments. His time is whatever it takes to meet the needs of that patient."

We need more doctors like Dr. Mansfield in this world. He is truly a point of light, an actively practicing role model for other practitioners in treating lung cancer diseases. It is because of Dr. Mansfield that many of us are not just still living, but we are living a life of quality.

EDITOR'S NOTE: Leah "Cherry" Lommen died shortly after this essay was submitted in July 2020. Our thoughts go out to her family and friends.

GOING THE EXTRA MILE

AMY NORTON, RN

SARAH CANNON CANCER INSTITUTE, OVERLAND PARK, KANSAS

Written by Gina Shay-Zapien, APRN, Sarah Cannon Cancer Institute, Overland Park, Kansas

AMY NORTON, RN, became a lung navigator for Sarah Cannon Cancer Institute because it fit her personality and work experience. Her knowledge as an oncology nurse and her kind, positive demeanor were instant assets for the cancer team. During her tenure, she has witnessed dramatic advances in treatment for lung cancer and continues to rejoice with many long-term survivors with stage 4 disease.

She also has overseen the forming of a lung screening program that helps cancers be discovered prior to symptoms, supporting the idea that early detection saves lives. She was instrumental in starting a lung nodule program, providing education and support to patients with asymptomatic nodules found on routine lung images. Amy works to prevent lung cancer, too. She became a certified smoking-cessation »





counselor so she could run eight-week smoking-cessation programs for area patients with cancer. As an example of Amy's willingness to go the extra mile, she personally supports the attendees by eliminating one of her habits — she avoids carbohydrates throughout the program.

Recognizing that lung cancer needed more recognition from the community, Amy formed a board and created an annual golf tournament to raise funds and awareness for lung cancer. This year, she will host the second annual Kansas City Lung Cancer Research Foundation/Free to Breathe fundraiser at the Nicklaus Golf Club at LionsGate.

Amy Norton is a true lung cancer hero!

BECOMING A CHAMPION

LISA PRZYBYLA

NEW BERLIN, WISCONSIN

Written by Dona Wininsky, M.A.

FOR MONTHS, 50-YEAR-OLD Lisa Przybyla had a nagging pain in her right shoulder and back that she attributed to exercise and strain. The pain continued to worsen over time and became excruciating when lying down. As the months went on, Lisa began experiencing shortness of breath. Lisa underwent months of doctor appointments and tests, including MRIs and a CT scan, which revealed a pleural effusion (fluid buildup between the lungs and chest). Thoracic surgery was scheduled in March 2017 to drain the fluid and to find out what was causing it. During this surgery, doctors found a cancerous mass in the lining of her right lung and diagnosed Lisa with stage 4 non-small cell lung cancer caused by the ALK gene mutation.

This type of cancer is extremely rare, making up only 2% to 5% of all lung cancers. Most patients are nonsmokers or light smokers between the ages of 30 and 60. Some survivors, however, are as young as 17. The good news is that it can be treated by targeted therapy. »

Lisa was the beneficiary of a new drug called Alecensa (alectinib) that had been approved for non-small cell lung cancer just 15 months earlier. The Food and Drug Administration granted approval for first-line use in November 2017.

Lisa's diagnosis came as a complete surprise. Having led a healthy lifestyle, lung cancer was not even on her radar, yet despite having both good days and bad days, Lisa decided to fully embrace life and turn this experience into something positive.

After her diagnosis, Lisa turned to the American Lung Association in Wisconsin to offer support for others with lung cancer. In the three years since her diagnosis, Lisa has become a champion for those with lung cancer, raising money for research and advocating for policies to find new treatments and cures. Her volunteer activities have included the following:

- Fielding a team the ALK Warriors at three Milwaukee area LUNG FORCE Walks and being top fundraiser by raising more than \$11,000.
- Serving as the 2019 Wisconsin LUNG FORCE Hero, participating in the Lung Association's annual Advocacy Day in Washington, D.C. At that event she met with five elected officials to lobby for increased National Institutes of Health funding for cancer research and to protect the Affordable Care Act.
- Being a member of the American Lung Association's Advocacy Network and Rapid Response team, which contacts elected officials about important issues that affect people with lung cancer and other lung disease.
- Serving as a lung cancer mentor for Imerman Angels, an organization that links newly diagnosed patients with lung cancer with those who have already traveled the lung cancer road.

- Sharing her story with the media through news interviews, social media videos and letters to the editor.
- Volunteering for numerous Wisconsin programs and events, including the Fight For Air Climb and the annual O2 Oxygen Ball.

There is no request too large or small, whether it's unwrapping and assembling 1,500 turquoise pinwheels for the LUNG FORCE Walk or cutting and laminating signage for the Fight For Air Climb. Her positivity and kindness are truly unmatched. She gives of her time, talents and resources and shares her personal journey with lung cancer to inspire hope and change.

Lisa has always accepted that at some point the cancer will get smart and learn how to get around her present treatment. That was confirmed in April 2020, when her scan revealed small spots in the lining of her right lung. Because radiation can't be used to treat this area, Lisa will continue with her current targeted therapy. A further scan in June will determine next steps. Regardless of the outcome, Lisa will always take an active role in her health care.

During these difficult times, Lisa never lets life take a back seat to her cancer. She focuses on the good things such as living each day and staying hopeful. She is feeling well, traveling and remaining optimistic.

Lisa sums up her journey with lung cancer this way: "Cancer takes away a lot from its patients and leaves you feeling very helpless. I can't do anything to control the cancer, but I can share my story to make others aware that lung cancer can affect anyone. If you have lungs, you can get lung cancer. It not only affects the patients but their families, too. We need to support funding for research and treatment as well as education. We are stronger together."



A LUNG LEGEND

DR. ROBERT RAMIREZ

OCHSNER HEALTH CENTER, KENNER, LOUISIANA

Written by Kristen Gurba, New Orleans, Louisiana

DR. ROBERT RAMIREZ is a physician at the NOLANETS clinic at Ochsner Health. He has clinical and research interests in lung cancer, specifically non-small cell and small cell cancers, as well as neuroendocrine tumors of the lung, including diffuse, idiopathic, pulmonary, neuroendocrine, cell hyperplasia, typical and atypical carcinoids. He has given multiple presentations at national and international meetings on lung cancer and neuroendocrine tumors and has multiple peer-reviewed publications. He is a recognized thought leader in these fields. He splits his clinical and research duties between the Ochsner Lung Cancer Multidisciplinary Program and the Ochsner Kenner/LSU Multidisciplinary Neuroendocrine Clinic. He is active in clinical trial design as well as teaching fellows, residents and medical students.

Dr. Ramirez is passionate about lung cancer and his research.



THE GIVING SPIRIT

LOIS SHOHEN BROWN

Written by Susan Wilson, RN, APN-C, Ventnor City, New Jersey

MY LUNG CANCER HERO is both a lung cancer survivor and long-time activist in the cancer community. Lois Shohen Brown had her first bout of lung cancer more than 25 years ago and has undergone numerous surgeries and radiation. She has been on targeted therapy for years. Her brave fight as a patient with lung cancer added fuel to her already giving spirit as a health advocate. She has for many years at the local level participated in groups that raise money for local health care. I became involved with Lois in 2006 when our local Oncology Nursing Society chapter decided to plan a walk for lung cancer awareness on the beautiful Ventnor City, New Jersey, boardwalk. Lois became involved in that endeavor. Since that time, we have worked with a small group of individuals to hold an annual event to provide support for patients with lung cancer and raise money to help in the fight against lung cancer. Lois remains active and tireless in her efforts to help raise money to help fight lung cancer at all levels.



A DEDICATED GUIDE

BEVERLY SMITH, ANP-BC, NE-BC

PERLMUTTER CANCER CENTER, NYU LANGONE HEALTH, NEW YORK, NEW YORK

Written by **Catherine Concert, D.N.P., RN, FNP-BC, AOCNP, NE-BC, CNL, CGRN, FNAP, FNYAM**, Perlmutter Cancer Center, NYU Langone Health, New York, New York

"I didn't think that we were involved in great change, but then change became the name of the game." — Loretta Ford

SEEING A GAP IN ADEQUATE CARE for rural families, Loretta Ford helped start the country's first nurse practitioner program, specializing in pediatrics, in the 1960s. She is considered the founder of the nurse practitioner movement. Nurse practitioners continually improve their expertise by sharing professional skills and searching for ways to improve and expand the profession, most especially for those patients with lung cancer. They go against the grain to navigate the medical system with prowess for individual, departmental and organizational success in helping patients who have received a new diagnosis or for those individuals receiving palliative radiation for a lung cancer diagnosis.

Beverly Smith, ANP-BC, NE-BC, is the Loretta Ford of NYU Langone Health. She has dedicated 40 years of her life to a wonderful nursing/nurse practitioner career here. »



This journey has become like her family, one she has embraced, improved upon and expanded throughout her profession. She has held many positions at NYU, with her present role being a nurse practitioner caring for patients with lung cancer. She continually fights for our well-defined scope of care and greater professional and economic recognition in the care she provides. By teaming up with community partners and radiation and medical oncologists, Beverly has been able to help people and patients stay healthy and assist patients who already have chronic illnesses to maintain their health and prevent further disease and disability when possible. She goes at great lengths to do so. She provides palliative and comfort care and resources for patients and families to maintain the best quality of life, and she assists with terminal/hospice care for those at the end of life.

What sets Beverly apart from other health care providers is her unique emphasis on caring for, comforting and seeing the patient as a whole person. By focusing on health promotion, disease prevention, and health education and counseling, Beverly guides patients in making smarter health and lifestyle choices, which in turn can better their quality of life. Beverly demonstrates the reflective practitioner who can improve practice by dedicating time each day to thinking, reading and writing about what she has experienced. By sharing this experience, potential implementation for improvement can be generated via individual, departmental or organizational facilitation for success.



AURA AND ISAAC PERLMUTTER CANCER CENTER

NYU Langone MEDICAL CENTER

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From left: CATHERINE CONCERT, D.N.P., RN, FNP-BC, AOCNP, NE-BC, CNL, CGRN, FNAP, FNYAM and BEVERLY SMITH, ANP-BC, NE-BC



A FORCE TO BE RECKONED WITH

DEBRA SMITH

SUNTREE ELEMENTARY, MELBOURNE, FLORIDA

Written by Amanda Roman, American Lung Association

I HAVE HAD THE PLEASURE of knowing Debra Smith since the start of my career at the American Lung Association in April 2018. She is one of the strongest, kindest, most courageous and compassionate people I have ever known.

Deb is a first-grade teacher at Suntree Elementary in Melbourne, Florida. She was diagnosed with stage 4 lung cancer in February 2018 and has been fighting her fight ever since. Having never smoked a day in her life and being as healthy and active as possible, this was a complete shock and unexpected life event. Deb is married to Kent and has two children, Kyle and Kaylie. Her family is her entire world and the best support system one could ask for.

At the LUNG FORCE Run/Walk – Orlando in May 2018, I expected to see Deb and her family walking that day, but, instead, Deb showed up with more than 60 team members and raised more than \$5,000 for lung cancer research! Her life is in the hands of lung cancer research, and every day she continues to educate others, share her story and advocate for everyone battling lung cancer. Deb Smith is a true force, and I am honored to work alongside her in my role at the American »



Lung Association. She recently joined our Volunteer Leadership Committee, which helps plan and raise money for our LUNG FORCE Run/Walk, an event dedicated to women and families battling lung cancer. For our 2020 event, Deb and her teammates raised more than \$8,000.

My job is so meaningful to me because of people like Deb. I want to continue fighting for her and contributing in any way I can to lung cancer research so that she can live the happy and healthy life she so deserves. Debra Smith is my personal hero and a LUNG FORCE hero to the American Lung Association. I am honored to know her and serve our communities alongside her and am proud to nominate her for a 2020 Lung Cancer Heroes[®] award.

* Janelle Hom is photographed in place of Amanda Roman, who is no longer with the American Lung Association

WORKING BEHIND THE SCENES

JODY RUTH STEINHARDT, M.P.H., CHES

MAIMONIDES MEDICAL CENTER, BROOKLYN, NEW YORK

Written by Liz D'Imperio, American Lung Association, New York, New York

JODY RUTH STEINHARDT, M.P.H., CHES, is the coordinator of the lung cancer screening program at Maimonides Medical Center, where she started her career 30 years ago as the oncology program coordinator.

I have known Jody for six years. She has worked tirelessly to advance the understanding of the critical importance of lung cancer screening. Jody is a champion for patients with lung cancer. As the coordinator for the lung screening program, she has a detailed understanding of lung screening criteria, qualifications for screening and the latest updates on early screening data. Jody advocates for her patients, getting to know them, educating them on the importance of early screening and outlining all risks and benefits of testing. »



JODY RUTH STEINHARDT, M.P.H., CHES PHOTOS BY CLAUDIO PAPAPIETRO



She diligently follows up to ensure they are getting the proper referrals for treatment and making sure they are aware of why and when to return for follow-up screening.

Jody joined the American Lung Association LUNG FORCE initiative at its inception in 2014. Her efforts in fundraising and advocacy have helped to raise thousands of dollars toward research and education about the benefits of early screening and new and effective therapies. Jody has been a valued member of the LUNG FORCE Expo educational event planning committee, bringing her passion and expertise to a forum where health care professionals, patients and their caregivers come to learn about the latest in treatments, medications, resources and research to help those living with lung cancer and other lung diseases lead healthier, active lives.

I enthusiastically nominate Jody Ruth Steinhardt for the Lung Cancer Heroes® award.

BEST DOCTOR EVER

DR. MICHAEL VOLK

GREEN BAY ONCOLOGY, OCONTO FALLS, WISCONSIN

Written by **Rose Vaness**, Marinette, Wisconsin

DR. MICHAEL VOLK has gone beyond his normal doctor duties to ensure I am comfortable and living a normal life with lung cancer. He consulted with a doctor in New York at the beginning of my journey. This was at my request. He is always there, even if not physically. He always answers his phone if there are questions about anything. He is the best doctor ever.



DR. MICHAEL VOLK PHOTO PROVIDED BY GREEN BAY ONCOLOGY

LEADING THROUGH RESEARCH, EDUCATION

DR. ANTOINETTE J. WOZNIAK

UNIVERSITY OF PITTSBURGH MEDICAL CENTER HILLMAN CANCER CENTER, PITTSBURGH, PENNSYLVANIA

Written by **Dr. Maha H.A. Hussain**, Robert H. Lurie Comprehensive Cancer Center of Northwestern University, Chicago, Illinois



DR. ANTOINETTE J. WOZNIAK is a professor of medicine in the division of hematology/oncology at the University of Pittsburgh School of Medicine and associate director for clinical research and director of the lung cancer disease unit for the University of Pittsburgh Medical Center Hillman Cancer Center. Prior to this, she was a professor of oncology and leader of the multidisciplinary thoracic team at the Barbara Ann Karmanos Cancer Institute in Detroit, Michigan.

Dr. Wozniak has been an oncologist for more than 30 years. For 25-plus years, she has devoted her practice to the care and treatment of patients with lung cancer. Her main research interests have been in clinical trials for thoracic malignancies and new drug development. She has been a researcher for numerous clinical trials, including national trials conducted through the Southwest Oncology Group and



at her own institution. She has more than 250 published articles, abstracts and book chapters. She is an active member and has served on several committees for the American Society of Clinical Oncology and the International Association for the Study of Lung Cancer. She has served as a member of the Oncology Drugs Advisory Committee for the Food and Drug Administration and is on the medical advisory board of the American Lung Association. She is editor in chief of *Clinical Lung Cancer*. She was a founding member of Free to Breathe, where she has served as secretary-treasurer and on the board of directors, and she has continued on the scientific committee since the organization's merger with the Lung Cancer Research Foundation.

She is an active educator, team player, patient-centered physician and strong patient advocate. She is very worthy of this recognition as a lung cancer hero.



CURE[®] combines science with humanity to empower patients with cancer and their caregivers by offering the latest information on every aspect of the disease, from the technical and scientific to the social and emotional.

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CURE[®] Lung Cancer Heroes[®] Volume 1 is a collection of inspiring essays written by patients, survivors, advocates, caregivers and colleagues about the people who touch lives while caring for those affected by lung cancer. These essays offer lessons about healing in the face of adversity, persevering against the odds and discovering kindness and compassion that can occur during one's cancer journey.

"The impact of (this doctor) is known and felt across the lung cancer community in North Carolina and nationally. Most importantly, however, is the way that she has individually affected each of her patients through her thoughtful and steadfast pursuit of bringing the very best care and treatment options for them."

- ABOUT A LUNG CANCER HERO FROM RALEIGH, NORTH CAROLINA

"She inspires others to fight back and make lung cancer a stigma of the past. During her quest to save others from the deadliest cancer, she undergoes lung cancer treatments, all while maintaining a positive attitude and a heart full of gratitude."

- ABOUT A LUNG CANCER HERO FROM NORTH SMITHFIELD, RHODE ISLAND

"She lives and breathes hope into her patients and providers day in and day out. ... Her passion for the program and patients with lung cancer can be seen in her dedication and commitment to her job and this community each and every day."

- ABOUT A LUNG CANCER HERO FROM FRAMINGHAM, MASSACHUSETTS

